

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**
NEW REPUBLICAN PAC

ADDRESS (number and street) **204 S MONROE ST. SUITE 201-A**
Check if different than previously reported. (ACC) **TALLAHASSEE FL 32301**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00544544 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 / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on **11** / **03** / **2020** in the State of **VA**

5. Covering Period **10** / **01** / **2020** through **11** / **23** / **2020**

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

Signature of Treasurer *Collins, Gentry, , ,* [Electronically Filed] Date **01** / **11** / **2021**

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)

Page 2

Write or Type Committee Name

NEW REPUBLICAN PAC

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="2020"/>		169317.44
(b) Cash on Hand at Beginning of Reporting Period.....	10240.74	
(c) Total Receipts (from Line 19)	0.00	75.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	10240.74	169392.44
7. Total Disbursements (from Line 31).....	4356.25	163507.95
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	5884.49	5884.49
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)	40833.34	

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. 05/2016)

Write or Type Committee Name

NEW REPUBLICAN PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 01 / 2020 To: M M / D D / Y Y Y Y Y Y
11 / 23 / 2020

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	75.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	75.00
(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	75.00
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)).....▶	0.00	75.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	75.00

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	4356.25	4356.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4356.25	4356.25
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	159151.70
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)) ..	4356.25	163507.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4356.25	163507.95

DETAILED SUMMARY PAGE
of Disbursements

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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	75.00
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	75.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	4356.25	4356.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4356.25	4356.25

**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

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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. HOLTZMAN VOGEL		Date of Disbursement MM / DD / YYYY 11 / 16 / 2020
Mailing Address 45 NORTH HILL DRIVE STE 100		FEC Identification Number C Transaction ID : SB21B.4330 Amount of Each Disbursement this Period 177.50
City WARRENTON	State VA	
Purpose of Disbursement LEGAL CONSULTING	Zip Code 20186	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. HOLTZMAN VOGEL		Date of Disbursement MM / DD / YYYY 11 / 16 / 2020
Mailing Address 45 NORTH HILL DRIVE STE 100		FEC Identification Number C Transaction ID : SB21B.4331 Amount of Each Disbursement this Period 1225.00
City WARRENTON	State VA	
Purpose of Disbursement LEGAL CONSULTING	Zip Code 20186	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. HOLTZMAN VOGEL		Date of Disbursement MM / DD / YYYY 11 / 16 / 2020
Mailing Address 45 NORTH HILL DRIVE STE 100		FEC Identification Number C Transaction ID : SB21B.4332 Amount of Each Disbursement this Period 335.00
City WARRENTON	State VA	
Purpose of Disbursement LEGAL CONSULTING	Zip Code 20186	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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:		

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

1777.50

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)
NEW REPUBLICAN PAC

A. HOLTZMAN VOGEL

Full Name (Last, First, Middle Initial)

Mailing Address 45 NORTH HILL DRIVE
STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 16 / 2020

FEC Identification Number: C

Transaction ID : SB21B.4333

Amount of Each Disbursement this Period: 1837.50

Memo Item

B. HOLTZMAN VOGEL

Full Name (Last, First, Middle Initial)

Mailing Address 45 NORTH HILL DRIVE
STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 16 / 2020

FEC Identification Number: C

Transaction ID : SB21B.4334

Amount of Each Disbursement this Period: 122.50

Memo Item

C. HOLTZMAN VOGEL

Full Name (Last, First, Middle Initial)

Mailing Address 45 NORTH HILL DRIVE
STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 16 / 2020

FEC Identification Number: C

Transaction ID : SB21B.4335

Amount of Each Disbursement this Period: 618.75

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2578.75

TOTAL This Period (last page this line number only)..... ▶ 4356.25

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4251**
NEW REPUBLICAN PAC

LOAN SOURCE Full Name (Last, First, Middle Initial) CASTELLANOS, ALEJANDRO, , ,			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 399 NORTH QUAKER LANE				
City	State	ZIP Code		
ALEXANDRIA	VA	22304		

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 02 / 03 / 2015	MM / DD / YYYY 12/31/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	▶	20000.00
TOTALS This Period (last page in this line only)	▶	20000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 11
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor HOLTZMAN VOGEL			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 45 NORTH HILL DRIVE STE 100			
City WARRENTON	State VA	Zip Code 20186	

Outstanding Balance Beginning This Period <input type="text" value="217.50"/>	Transaction ID : SD10.4313	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="217.50"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor HOLTZMAN VOGEL			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 45 NORTH HILL DRIVE STE 100			
City WARRENTON	State VA	Zip Code 20186	

Outstanding Balance Beginning This Period <input type="text" value="1225.00"/>	Transaction ID : SD10.4324	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1225.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor HOLTZMAN VOGEL			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 45 NORTH HILL DRIVE STE 100			
City WARRENTON	State VA	Zip Code 20186	

Outstanding Balance Beginning This Period <input type="text" value="335.00"/>	Transaction ID : SD10.4325	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="335.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 11
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor HOLTZMAN VOGEL			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 45 NORTH HILL DRIVE STE 100			
City WARRENTON	State VA	Zip Code 20186	

Outstanding Balance Beginning This Period 1837.50	Transaction ID : SD10.4326	
Amount Incurred This Period 0.00	Payment This Period 1837.50	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor HOLTZMAN VOGEL			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 45 NORTH HILL DRIVE STE 100			
City WARRENTON	State VA	Zip Code 20186	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4328	
Amount Incurred This Period 122.50	Payment This Period 122.50	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor HOLTZMAN VOGEL			Nature of Debt (Purpose): LEGAL CONSULTING
Mailing Address 45 NORTH HILL DRIVE STE 100			
City WARRENTON	State VA	Zip Code 20186	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4329	
Amount Incurred This Period 618.75	Payment This Period 618.75	Outstanding Balance at Close of This Period 0.00

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 11
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): STRATEGIC CONSULTING
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 20833.34		Transaction ID : SD10.4241	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20833.34	

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

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

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

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

1) SUBTOTALS This Period This Page (optional)..... ▶	20833.34
2) TOTALS This Period (last page this line number only)..... ▶	20833.34
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	20000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	40833.34