

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.
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 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) 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 / / in the State of

5. Covering Period / / through / /

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 SCOTT B MACKENZIE

Signature of Treasurer SCOTT B MACKENZIE [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

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="2014"/>	<input type="text" value="12637.04"/>	<input type="text" value="12637.04"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="77339.37"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="136352.51"/>	<input type="text" value="779380.57"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="213691.88"/>	<input type="text" value="792017.61"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="151996.56"/>	<input type="text" value="730322.29"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="61695.32"/>	<input type="text" value="61695.32"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="271345.56"/>	

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Report Covering the Period: From: 09 / 01 / 2014 To: 09 / 30 / 2014

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).....	40380.00	161481.00
(ii) Unitemized	95927.51	617396.57
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	136307.51	778877.57
(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)	136307.51	778877.57
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).....	45.00	503.00
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))..... ▶	136352.51	779380.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	136352.51	779380.57

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	123596.56	665971.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	123596.56	665971.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	20850.80
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22400.00	36500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	6000.00	7000.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	151996.56	730322.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	151996.56	730322.29

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	136307.51	778877.57
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	136307.51	778877.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	123596.56	665971.49
37. Offsets to Operating Expenditures (from Line 15, page 3).....	45.00	503.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	123551.56	665468.49

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

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

FOR LINE NUMBER: PAGE 6 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MAHBUBUL ALAM 113
 Full Name (Last, First, Middle Initial)
 Mailing Address 3426 71ST ST
 City JACKSON HEIGHTS State NY Zip Code 11372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 9000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : SA11AI.37735
 Amount of Each Receipt this Period
 9000.00

B. MAHBUBUL ALAM 113
 Full Name (Last, First, Middle Initial)
 Mailing Address 3426 71ST ST
 City JACKSON HEIGHTS State NY Zip Code 11372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2014
Transaction ID : SA11AI.42249
 Amount of Each Receipt this Period
 -9000.00
 NSF CONTRIBUTION

C. DR JAMES A ALBRIGHT 061 MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 51 BROOKSIDE BLVD
 City WEST HARTFORD State CT Zip Code 06107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED PHYSICIAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.37736
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MRS BONNIE AULD 926
Full Name (Last, First, Middle Initial)

Mailing Address 4019 CALLE SONORA ESTE UNIT B

City	State	Zip Code
LAGUNA WOODS	CA	92637

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **218.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2014

Transaction ID : SA11AI.37834

Amount of Each Receipt this Period

38.00

B. MRS LAURA BARKER 472
Full Name (Last, First, Middle Initial)

Mailing Address 4922 W COUNTY ROAD 300 N

City	State	Zip Code
GREENSBURG	IN	47240

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2014

Transaction ID : SA11AI.37889

Amount of Each Receipt this Period

200.00

C. MR PAUL B BARRINGER 299
Full Name (Last, First, Middle Initial)

Mailing Address 14 S CALIBOGUE CAY RD

City	State	Zip Code
HILTON HEAD	SC	29928

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

Name of Employer	Occupation
COASTAL FOREST RESOURCES	EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2014

Transaction ID : SA11AI.37899

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional).....▶	538.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 102
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. DR GERALD BECK 605
Full Name (Last, First, Middle Initial)

Mailing Address 545 N CATHERINE AVE

City LA GRANGE PARK State IL Zip Code 60526

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

Name of Employer SELF EMPLOYED Occupation DOCTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014
Transaction ID : SA11AI.37940

Amount of Each Receipt this Period
 200.00

B. DAVID C BENNETT 322
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 331081

City ATLANTIC BEACH State FL Zip Code 32233

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

Name of Employer MARINE CHEMIST CO Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2014
Transaction ID : SA11AI.37974

Amount of Each Receipt this Period
 250.00

C. MR RICHARD BENNETT 838
Full Name (Last, First, Middle Initial)

Mailing Address 1694 E HAYDEN AVE

City HAYDEN State ID Zip Code 83835

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014
Transaction ID : SA11AI.37975

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR RICHARD A BERNSTEIN 105
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 ROCKLEDGE RD
 City RYE State NY Zip Code 10580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer P&E CAPITAL INC Occupation CHAIRMAN & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2014
Transaction ID : SA11AI.37991
 Amount of Each Receipt this Period
 500.00

B. DR DAVID BERRY 917 MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 251 W TENNYSON ST
 City UPLAND State CA Zip Code 91784
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2014
Transaction ID : SA11AI.37995
 Amount of Each Receipt this Period
 250.00

C. MS LITA BIEJO 930
 Full Name (Last, First, Middle Initial)
 Mailing Address 9555 W LOS ANGELES AVE
 City MOORPARK State CA Zip Code 93021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.38013
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. DELIGHT S BONNER 739		Date of Receipt
Mailing Address 1430 RIMROCK DR		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
GUYMON	OK	73942
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.38087
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF EMPLOYED	FARMER	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="395.00"/>	

Full Name (Last, First, Middle Initial) B. MS WAULDINE BORDEN 740		Date of Receipt
Mailing Address 514 LEXINGTON RD		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAPULPA	OK	74066
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.38092
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. MRS JACQUELINE BOWE 294		Date of Receipt
Mailing Address 1 BISHOP GADSDEN WAY APT 314		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
CHARLESTON	SC	29412
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.38099
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="75.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="320.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="425.00"/>
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 11 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. LELAND BREDTHAUER 688
 Full Name (Last, First, Middle Initial)
 Mailing Address 821 S ARTHUR ST
 City GRAND ISLAND State NE Zip Code 68803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11AI.38127
 Amount of Each Receipt this Period
 250.00

B. MR JAMES P BROOKS 986
 Full Name (Last, First, Middle Initial)
 Mailing Address 4320 NE 261ST AVE
 City CAMAS State WA Zip Code 98607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FARMER Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : SA11AI.38159
 Amount of Each Receipt this Period
 200.00

C. MR ALBERT BROWN 214
 Full Name (Last, First, Middle Initial)
 Mailing Address 7101 BAY FRONT DR APT 602
 City ANNAPOLIS State MD Zip Code 21403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014
Transaction ID : SA11AI.38171
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR ALBERT BROWN 214
Full Name (Last, First, Middle Initial)

Mailing Address 7101 BAY FRONT DR APT 602

City	State	Zip Code
ANNAPOLIS	MD	21403

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014
Transaction ID : SA11AI.38172

Amount of Each Receipt this Period
35.00

B. MR HAROLD G BROWN 670
Full Name (Last, First, Middle Initial)

Mailing Address 1336 WALNUT ST

City	State	Zip Code
KINGMAN	KS	67068

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : SA11AI.38177

Amount of Each Receipt this Period
100.00

C. W P BUCKTHAL 791
Full Name (Last, First, Middle Initial)

Mailing Address 900 S LINCOLN ST

City	State	Zip Code
AMARILLO	TX	79101

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

Name of Employer	Occupation
SELF EMPLOYED	PETROLEUM GEOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1150.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11AI.38212

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	385.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MRS MARY BUOL 193
 Full Name (Last, First, Middle Initial)
 Mailing Address 1008 DUNVEGAN RD
 City WEST CHESTER State PA Zip Code 19382
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 09 / 15 / 2014
Transaction ID : SA11AI.38221
 Amount of Each Receipt this Period
 100.00

B. MR DAVID BURGETT 975
 Full Name (Last, First, Middle Initial)
 Mailing Address 1628 MEADOW VIEW DR
 City MEDFORD State OR Zip Code 97504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 09 / 19 / 2014
Transaction ID : SA11AI.38226
 Amount of Each Receipt this Period
 500.00

C. MR MICHAEL J BUSSINGER 761
 Full Name (Last, First, Middle Initial)
 Mailing Address 8205 MOUNT SHASTA CIR
 City FORT WORTH State TX Zip Code 76137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BNSF RAILWAY Occupation TRAIN DISPATCHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 29 / 2014
Transaction ID : SA11AI.38257
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. JAY CARTER 763
 Full Name (Last, First, Middle Initial)
 Mailing Address 1404 CHAPARRAL RD
 City State Zip Code
 BURKBURNETT TX 76354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARTER AVIATION TECHNOLOGIS CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.38337
 Amount of Each Receipt this Period
 100.00

B. JAY CARTER 763
 Full Name (Last, First, Middle Initial)
 Mailing Address 1404 CHAPARRAL RD
 City State Zip Code
 BURKBURNETT TX 76354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CARTER AVIATION TECHNOLOGIS CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 495.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.38336
 Amount of Each Receipt this Period
 150.00

C. MR JAMES F CAUSLEY 341 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 3333 GULFSHORE BLVD N #10
 City State Zip Code
 NAPLES FL 34103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2014
Transaction ID : SA11AI.38354
 Amount of Each Receipt this Period
 1125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1375.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR JOHN CERVIN 210 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 815A HILLTOP AVE EXT
 City ABINGDON State MD Zip Code 21009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2014
Transaction ID : SA11AI.38357
 Amount of Each Receipt this Period
 75.00

B. HARROLL CLEMMER 769
 Full Name (Last, First, Middle Initial)
 Mailing Address 5812 PECAN VALLEY LN
 City SAN ANGELO State TX Zip Code 76904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.38428
 Amount of Each Receipt this Period
 100.00

C. MS MARY K COLWELL 453
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 MARICOPA CIR
 City ENON State OH Zip Code 45323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2014
Transaction ID : SA11AI.38483
 Amount of Each Receipt this Period
 120.00

SUBTOTAL of Receipts This Page (optional).....▶	295.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MS MARY K COLWELL 453
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 MARICOPA CIR
 City ENON State OH Zip Code 45323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 705.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2014
Transaction ID : SA11AI.38484
 Amount of Each Receipt this Period
 45.00

B. MS MARY K COLWELL 453
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 MARICOPA CIR
 City ENON State OH Zip Code 45323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1005.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : SA11AI.38482
 Amount of Each Receipt this Period
 300.00

C. MR JOSEPH CORSO 080
 Full Name (Last, First, Middle Initial)
 Mailing Address 116 HOWARD ST
 City RIVERTON State NJ Zip Code 08077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2014
Transaction ID : SA11AI.38513
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 445.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 17 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR JOSEPH CORSO 080
 Full Name (Last, First, Middle Initial)
 Mailing Address 116 HOWARD ST
 City RIVERTON State NJ Zip Code 08077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2014
Transaction ID : SA11AI.38512
 Amount of Each Receipt this Period
 100.00

B. MR DONALD CRAWFORD 194
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 3003
 City BLUE BELL State PA Zip Code 19422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CRAWFORD BROADCASTING CO Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.38549
 Amount of Each Receipt this Period
 100.00

C. MR RONALD CRISLIP 494
 Full Name (Last, First, Middle Initial)
 Mailing Address 2319 TYLER ST
 City JENISON State MI Zip Code 49428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 319.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.38555
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 240.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 102
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. MS BRIGITTE S CROMWELL 068		Date of Receipt
Mailing Address 8 STONY LN		<input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
NORWALK	CT	06850
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.38562
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="315.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MRS MAXINE DALTON 851		Date of Receipt
Mailing Address 220 W SUNSET DR		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
SUPERIOR	AZ	85173
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.38591
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MRS CAROLYN J DAMON 967		Date of Receipt
Mailing Address PO BOX 791719		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
PAIA	HI	96779
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.38593
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="310.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="180.00"/>
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 19 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR CHARLES W DANIEL 352
 Full Name (Last, First, Middle Initial)
 Mailing Address 2716 SOUTHWOOD RD
 City MOUNTAIN BRK State AL Zip Code 35223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation ENTREPRENEUR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 15 / 2014
Transaction ID : SA11AI.38595
 Amount of Each Receipt this Period 200.00

B. MR KENNETH DARGIS 010
 Full Name (Last, First, Middle Initial)
 Mailing Address 85 NEW LUDLOW RD APT 419
 City CHICOPEE State MA Zip Code 01020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 22 / 2014
Transaction ID : SA11AI.38600
 Amount of Each Receipt this Period 100.00

C. SIMON DAVIDSON 706
 Full Name (Last, First, Middle Initial)
 Mailing Address 4107 TRENT LN
 City LAKE CHARLES State LA Zip Code 70605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 08 / 2014
Transaction ID : SA11AI.38617
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 550.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. MR DONALD G DEBODE 982		Date of Receipt
Mailing Address 2051 WEST BEACH RD		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
OAK HARBOR	WA	98277
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.38656
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF EMPLOYED	INNKEEPER	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. MR JAMES DOIG 972		Date of Receipt
Mailing Address 808 NE 102ND AVE		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
PORTLAND	OR	97220
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.38747
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. MR JAMES DOTINGA 982		Date of Receipt
Mailing Address 4026 SALT SPRING DR		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
FERNDAL	WA	98248
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.38769
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF EMPLOYED	APARTMENT MGR	<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="365.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="190.00"/>
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 21 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)
A. MR JAMES DOTINGA 982

Mailing Address 4026 SALT SPRING DR

City State Zip Code
FERNDALE WA 98248

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

Name of Employer Occupation
SELF EMPLOYED APARTMENT MGR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.38768

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
B. MR JAMES DOWNEY 940

Mailing Address 26000 NEW BRIDGE DR

City State Zip Code
LOS ALTOS CA 94022

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

Name of Employer Occupation
ALTOS SERVICE CORP PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.38777

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
C. MRS LOUISE C DOWNS 041

Mailing Address 20 BLUEBERRY LN APT L342

City State Zip Code
FALMOUTH ME 04105

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11AI.38778

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 355.00

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

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

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

FOR LINE NUMBER: PAGE 22 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. MR CHARLES EBROM 782		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 Transaction ID : SA11AI.38849
Mailing Address 213 SHEFFIELD		Amount of Each Receipt this Period 300.00
City SAN ANTONIO	State TX	Zip Code 78213
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer ZACHRY CONSTRUCTION CORP	Occupation VP OF ADMIN & ACCOUNTING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. MR JOHN R EDGEWORTH 342		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 Transaction ID : SA11AI.38854
Mailing Address 8776 PEBBLE CREEK LN		Amount of Each Receipt this Period 100.00
City SARASOTA	State FL	Zip Code 34238
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. MRS E MARDELL EDRESEN 922		Date of Receipt MM / DD / YYYY 09 / 08 / 2014 Transaction ID : SA11AI.38857
Mailing Address 57 TENNIS CLUB DR		Amount of Each Receipt this Period 113.00
City RANCHO MIRAGE	State CA	Zip Code 92270
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 113.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00	

SUBTOTAL of Receipts This Page (optional).....▶	513.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MRS E MARDELL EDRESEN 922
Full Name (Last, First, Middle Initial)
Mailing Address 57 TENNIS CLUB DR

City RANCHO MIRAGE	State CA	Zip Code 92270
-----------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
326.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2014

Transaction ID : SA11AI.38858

Amount of Each Receipt this Period
100.00

B. MRS WILMA EDWARDS 920
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 2948

City DEL MAR	State CA	Zip Code 92014
-----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	18	/	2014

Transaction ID : SA11AI.38865

Amount of Each Receipt this Period
200.00

C. MRS WILMA EDWARDS 920
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 2948

City DEL MAR	State CA	Zip Code 92014
-----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
545.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2014

Transaction ID : SA11AI.38866

Amount of Each Receipt this Period
45.00

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

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

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

FOR LINE NUMBER: PAGE 24 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)
A. MS JEAN ENGLAND 614

Mailing Address 576 KNOX ROAD 1300 E

City MAQUON State IL Zip Code 61458

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.38906

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. MR CLIFFORD L EPSTEIN 335

Mailing Address 18823 AVENUE BIARRITZ

City LUTZ State FL Zip Code 33558

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

Name of Employer RETAIL PROCESSING ENGINEERING CO Occupation PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.38919

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. MR CLIFFORD L EPSTEIN 335

Mailing Address 18823 AVENUE BIARRITZ

City LUTZ State FL Zip Code 33558

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

Name of Employer RETAIL PROCESSING ENGINEERING CO Occupation PARTNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11AI.38920

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 OF 102
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. MR MIKE FERRIS 815		Date of Receipt
Mailing Address 2264 HIGHWAY 6 AND 50		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
GRAND JUNCTION	CO	81505
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.38967
Name of Employer	Occupation	Amount of Each Receipt this Period
WESTERN SLOPE AUTO	OWNER & GENERAL MANAGER	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. MR MCDARA P FOLAN 110 JR		Date of Receipt
Mailing Address PO BOX 232		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
PORT WASHINGTON	NY	11050
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.39006
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF EMPLOYED	INSURANCE AGENT	<input type="text" value="75.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="345.00"/>	

Full Name (Last, First, Middle Initial) C. DR WAYNE S FRIESTAD 327 MD		Date of Receipt
Mailing Address 1528 LANGHAM TER		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
LAKE MARY	FL	32746
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.39056
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF EMPLOYED	EMERGENCY MEDICINE	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="825.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 26 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MRS BETTY GARDNER 648
 Full Name (Last, First, Middle Initial)
 Mailing Address 1572 GOODIN HOLLOW RD
 City NOEL State MO Zip Code 64854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.39106
 Amount of Each Receipt this Period
 70.00

B. MR DARRELL GARNER 945
 Full Name (Last, First, Middle Initial)
 Mailing Address 605 FILBERT CT
 City SAN RAMON State CA Zip Code 94583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WAKAMATSU INS AGENCY Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : SA11AI.39116
 Amount of Each Receipt this Period
 25.00

C. MR JOHN GOEBEL 341
 Full Name (Last, First, Middle Initial)
 Mailing Address 1325 7TH ST S APT 6C
 City NAPLES State FL Zip Code 34102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.39173
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MS LISE M GOGA 967
 Full Name (Last, First, Middle Initial)
 Mailing Address 95-1089 PAEMOKU PL
 City MILILANI State HI Zip Code 96789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014
Transaction ID : SA11AI.39176
 Amount of Each Receipt this Period
 100.00

B. MR ALBERT J GRAF 038
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1569
 City WOLFEBORO State NH Zip Code 03894
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.39202
 Amount of Each Receipt this Period
 2000.00

C. MR RICHARD S GRIFFITH 705
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 91610
 City LAFAYETTE State LA Zip Code 70509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.39238
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2600.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MISS BARBARA GRIMALDI 325
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 6040

City MIRAMAR BEACH State FL Zip Code 32550

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.39241

Amount of Each Receipt this Period
100.00

B. MRS HELEN GROSS 838
Full Name (Last, First, Middle Initial)

Mailing Address 2455 E WOODSTONE DR

City HAYDEN State ID Zip Code 83835

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **395.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : SA11AI.39251

Amount of Each Receipt this Period
100.00

C. WILLIAM GUYOL 631
Full Name (Last, First, Middle Initial)

Mailing Address 24 YORK HILLS DR

City SAINT LOUIS State MO Zip Code 63144

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.39272

Amount of Each Receipt this Period
90.00

SUBTOTAL of Receipts This Page (optional).....▶	290.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 29 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MYRNA HACKNEY 980
 Full Name (Last, First, Middle Initial)
 Mailing Address 13355 SE 43RD PL
 City BELLEVUE State WA Zip Code 98006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : SA11AI.39278
 Amount of Each Receipt this Period
 35.00

B. MYRNA HACKNEY 980
 Full Name (Last, First, Middle Initial)
 Mailing Address 13355 SE 43RD PL
 City BELLEVUE State WA Zip Code 98006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.39277
 Amount of Each Receipt this Period
 35.00

C. MRS MARJORIE HAILEY 668
 Full Name (Last, First, Middle Initial)
 Mailing Address 720 S NEOSHO ST
 City COUNCIL GROVE State KS Zip Code 66846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.39293
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 30 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MRS MARJORIE HAILEY 668
 Full Name (Last, First, Middle Initial)
 Mailing Address 720 S NEOSHO ST
 City COUNCIL GROVE State KS Zip Code 66846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.39294
 Amount of Each Receipt this Period
 50.00

B. MRS MARJORIE HAILEY 668
 Full Name (Last, First, Middle Initial)
 Mailing Address 720 S NEOSHO ST
 City COUNCIL GROVE State KS Zip Code 66846
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.39295
 Amount of Each Receipt this Period
 50.00

C. MRS EVELYN HAILEY 750
 Full Name (Last, First, Middle Initial)
 Mailing Address 731 BANKERS COTTAGE LN
 City COPPELL State TX Zip Code 75019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.39296
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR ROBERT K HANING 432
 Full Name (Last, First, Middle Initial)
 Mailing Address 5675 PONDEROSA DR #315

City COLUMBUS	State OH	Zip Code 43231
------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : SA11AI.39332

Amount of Each Receipt this Period
 1000.00

B. MRS ELIZABETH R HASKINS 244
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 FOREST HILL VW

City LEXINGTON	State VA	Zip Code 24450
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.39396

Amount of Each Receipt this Period
 30.00

C. MRS ELIZABETH R HASKINS 244
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 FOREST HILL VW

City LEXINGTON	State VA	Zip Code 24450
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.39395

Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	1065.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 32 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MRS ELIZABETH R HASKINS 244
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 FOREST HILL VW
 City LEXINGTON State VA Zip Code 24450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11AI.39394
 Amount of Each Receipt this Period
 25.00

B. MS ELLA M HELM 300
 Full Name (Last, First, Middle Initial)
 Mailing Address 3385 HALLMARK DR SE
 City MARIETTA State GA Zip Code 30067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014
Transaction ID : SA11AI.39440
 Amount of Each Receipt this Period
 75.00

C. MS ELLA M HELM 300
 Full Name (Last, First, Middle Initial)
 Mailing Address 3385 HALLMARK DR SE
 City MARIETTA State GA Zip Code 30067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2014
Transaction ID : SA11AI.39441
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MRS EDNA HENRY 194
Full Name (Last, First, Middle Initial)

Mailing Address 3417 BRITTANY PT

City LANSDALE	State PA	Zip Code 19446
------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		10		2014

Transaction ID : SA11AI.39455

Amount of Each Receipt this Period
25.00

B. MR ERNEST E HENSHAW 342
Full Name (Last, First, Middle Initial)

Mailing Address 226 BRANDYWINE CIR

City ENGLEWOOD	State FL	Zip Code 34223
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		16		2014

Transaction ID : SA11AI.39458

Amount of Each Receipt this Period
200.00

C. MR BILL HOLDEN 956
Full Name (Last, First, Middle Initial)

Mailing Address 4467 PLANTATION DR

City FAIR OAKS	State CA	Zip Code 95628
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		18		2014

Transaction ID : SA11AI.39523

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 34 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MRS MARTHA L HUTCHISON 895
 Full Name (Last, First, Middle Initial)
 Mailing Address 2330 CROWS NEST PKWY
 City RENO State NV Zip Code 89519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HUTCH'S CAR WASHES, INC Occupation SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 22 / 2014
Transaction ID : SA11AI.39615
 Amount of Each Receipt this Period 100.00

B. MR BRUCE C JACOBSON 483
 Full Name (Last, First, Middle Initial)
 Mailing Address 1019 WALLOON CT
 City LAKE ORION State MI Zip Code 48360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt 09 / 15 / 2014
Transaction ID : SA11AI.39653
 Amount of Each Receipt this Period 100.00

C. DURK JAGER 294
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 OTTER IS
 City JOHNS ISLAND State SC Zip Code 29455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KIAWAH CONSERVANCY Occupation TRUSTEE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2014
Transaction ID : SA11AI.39654
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. DR JEANNE JAGGARD 074 MD		Date of Receipt
Mailing Address 16 APACHE RD		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
WAYNE	NJ	07470
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.39659
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
RETIRED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR LOREN JAHN 604		Date of Receipt
Mailing Address 13149 N COUNTRY CLUB CT		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
PALOS HEIGHTS	IL	60463
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.39662
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
LOREN JAHN PRIVATE CHARITABLE FOUNDATION	DIRECTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="550.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MRS BARBARA A JARVIS 770		Date of Receipt
Mailing Address 13923 DUNCANNON DR		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
HOUSTON	TX	77015
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.39674
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="575.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="350.00"/>
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: (check only one)	PAGE 36 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. MRS BARBARA A JARVIS 770		Date of Receipt
Mailing Address 13923 DUNCANNON DR		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
HOUSTON	TX	77015
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.39673
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="610.00"/>	<input type="text" value="35.00"/>

Full Name (Last, First, Middle Initial) B. MRS JOYCE JENNISON 928		Date of Receipt
Mailing Address 8203 E BAILEY WAY		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
ANAHEIM	CA	92808
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.39678
HUMAN RESOURCES	DIRECTOR	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	<input type="text" value="100.00"/>

Full Name (Last, First, Middle Initial) C. MR THEODORE JOHNSON 628		Date of Receipt
Mailing Address 120 JOHNSON LN		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
CROSSVILLE	IL	62827
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.39709
JOHNSON FARMS	PRINCIPAL	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="310.00"/>	<input type="text" value="75.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="210.00"/>
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 37 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR JOHN A JOST 598
 Full Name (Last, First, Middle Initial)
 Mailing Address 1531 SLEEPING CHILD RD
 City State Zip Code
 HAMILTON MT 59840
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.39753
 Amount of Each Receipt this Period
 50.00

B. ELIZABETH R KAIME 874
 Full Name (Last, First, Middle Initial)
 Mailing Address 5007 MEAD LN
 City State Zip Code
 FARMINGTON NM 87402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : SA11AI.39762
 Amount of Each Receipt this Period
 25.00

C. MRS LAURA M KAUFFMANN 342
 Full Name (Last, First, Middle Initial)
 Mailing Address 1565 BAY POINT DR
 City State Zip Code
 SARASOTA FL 34236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11AI.39779
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 OF 102
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR ROY W KNIPPER 442 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 LAUREL LAKE DR
 City HUDSON State OH Zip Code 44236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2014
Transaction ID : SA11AI.39858
 Amount of Each Receipt this Period
 250.00

B. MR ROY W KNIPPER 442 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 LAUREL LAKE DR
 City HUDSON State OH Zip Code 44236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2014
Transaction ID : SA11AI.39860
 Amount of Each Receipt this Period
 300.00

C. MS MARY G KOEHL 774
 Full Name (Last, First, Middle Initial)
 Mailing Address 1307 MANOR LAKE CT
 City RICHMOND State TX Zip Code 77406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.39874
 Amount of Each Receipt this Period
 113.00

SUBTOTAL of Receipts This Page (optional).....▶	663.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 39 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)
A. MR JAMES E LAIN 926

Mailing Address PO BOX 1939

City State Zip Code
 HUNTINGTON BEACH CA 92647

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

Name of Employer Occupation
 NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11AI.39950

Amount of Each Receipt this Period
 200.00

Full Name (Last, First, Middle Initial)
B. MR CHRISTIAN LARSON 840

Mailing Address 6300 SAGEWOOD DR #H253

City State Zip Code
 PARK CITY UT 84098

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.39997

Amount of Each Receipt this Period
 35.00

Full Name (Last, First, Middle Initial)
C. MR CHRISTIAN LARSON 840

Mailing Address 6300 SAGEWOOD DR #H253

City State Zip Code
 PARK CITY UT 84098

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.39998

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 260.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MS RITA LAUZON 010
Full Name (Last, First, Middle Initial)
Mailing Address 14 INGHAM ST

City CHICOPEE	State MA	Zip Code 01013
------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	11	/	2014

Transaction ID : SA11AI.40015

Amount of Each Receipt this Period

475.00

B. MR CARL WILLIAM LEBENGOOD 974
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 344

City MYRTLE CREEK	State OR	Zip Code 97457
----------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2014

Transaction ID : SA11AI.40034

Amount of Each Receipt this Period

400.00

C. ERNEST LEGER 863
Full Name (Last, First, Middle Initial)
Mailing Address 1575 E ARROWHEAD LN

City COTTONWOOD	State AZ	Zip Code 86326
--------------------	-------------	-------------------

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

Name of Employer US MILITARY	Occupation OFFICER
---------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2014

Transaction ID : SA11AI.40047

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional).....	475.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 41 OF 102
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. ERNEST LEGER 863		Date of Receipt
Mailing Address 1575 E ARROWHEAD LN		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
COTTONWOOD	AZ	86326
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.40049
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>
Name of Employer	Occupation	
US MILITARY	OFFICER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="310.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR ROBERT LEIGHTON 430		Date of Receipt
Mailing Address 1687 LAKE DR		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
HEATH	OH	43056
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.40054
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="35.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS PHYLLIS O LEWELLYN 300		Date of Receipt
Mailing Address 1125 TIMBERLAND DR SE		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
MARIETTA	GA	30067
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.40078
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="35.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="330.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="145.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. ROBERT LILLY 786		Date of Receipt
Mailing Address 104 ASTER CIR		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
GEORGETOWN	TX	78633
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.40088
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS MARJORIE R LINDSEY 933		Date of Receipt
Mailing Address 10202 DUTCH IRIS DR		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
BAKERSFIELD	CA	93311
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.40099
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
NONE	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS MARJORIE R LINDSEY 933		Date of Receipt
Mailing Address 10202 DUTCH IRIS DR		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Zip Code
BAKERSFIELD	CA	93311
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.40100
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
NONE	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
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 43 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MS MARJORIE R LINDSEY 933
 Full Name (Last, First, Middle Initial)
 Mailing Address 10202 DUTCH IRIS DR
 City BAKERSFIELD State CA Zip Code 93311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.40101
 Amount of Each Receipt this Period
 200.00

B. MR EDWARD LOUIS 600
 Full Name (Last, First, Middle Initial)
 Mailing Address 645 N WREN AVE
 City PALATINE State IL Zip Code 60067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2014
Transaction ID : SA11AI.40142
 Amount of Each Receipt this Period
 250.00

C. DR WALTER LUNG 968 DDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4244 HUANUI ST
 City HONOLULU State HI Zip Code 96816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.40160
 Amount of Each Receipt this Period
 53.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 503.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 44 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. DR WALTER LUNG 968 DDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4244 HUANUI ST
 City HONOLULU State HI Zip Code 96816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 278.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.40161
 Amount of Each Receipt this Period
 35.00

B. MRS LAURIE J MACKEY 325
 Full Name (Last, First, Middle Initial)
 Mailing Address 4396 WINDLAKE DR
 City NICEVILLE State FL Zip Code 32578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.40174
 Amount of Each Receipt this Period
 100.00

C. MRS RUTH MARK 465
 Full Name (Last, First, Middle Initial)
 Mailing Address 1811 WOODGATE DR
 City GOSHEN State IN Zip Code 46526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2014
Transaction ID : SA11AI.40226
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MRS RUTH MARK 465
 Full Name (Last, First, Middle Initial)
 Mailing Address 1811 WOODGATE DR
 City GOSHEN State IN Zip Code 46526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2014
Transaction ID : SA11AI.40228
 Amount of Each Receipt this Period
 25.00

B. MRS RUTH MARK 465
 Full Name (Last, First, Middle Initial)
 Mailing Address 1811 WOODGATE DR
 City GOSHEN State IN Zip Code 46526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : SA11AI.40225
 Amount of Each Receipt this Period
 35.00

C. MRS RUTH MARK 465
 Full Name (Last, First, Middle Initial)
 Mailing Address 1811 WOODGATE DR
 City GOSHEN State IN Zip Code 46526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : SA11AI.40227
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 46 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR WILLIAM L MARLIN 922
 Full Name (Last, First, Middle Initial)
 Mailing Address 41505 CARLOTTA DR APT 222
 City PALM DESERT State CA Zip Code 92211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2014
Transaction ID : SA11AI.40233
 Amount of Each Receipt this Period
 50.00

B. MR WILLIAM L MARLIN 922
 Full Name (Last, First, Middle Initial)
 Mailing Address 41505 CARLOTTA DR APT 222
 City PALM DESERT State CA Zip Code 92211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : SA11AI.40234
 Amount of Each Receipt this Period
 20.00

C. MR KERRY MCCAN 779 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 146
 City VICTORIA State TX Zip Code 77902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : SA11AI.40299
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 320.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. MS KATHLEEN E MCCARTHY 894		Date of Receipt
Mailing Address PO BOX 917		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.40305
VIRGINIA CITY	NV	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="125.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR WILLIAM MCDERMOTT 025		Date of Receipt
Mailing Address 174 QUEEN ST		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.40333
FALMOUTH	MA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="100.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MRS OLIVIA MCFADDEN 852		Date of Receipt
Mailing Address 11011 N ZEPHYR DR UNIT 111		<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.40338
FOUNTAIN HILLS	AZ	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="500.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1375.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="725.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 48 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. MS PATRICIA MCHUGH 440		Date of Receipt
Mailing Address 9425 JACKSON ST		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.40348
MENTOR	OH	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="35.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="230.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR WILLIAM G MCLAUGHLIN 336		Date of Receipt
Mailing Address 1510 E PALM AVE APT A314		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.40370
TAMPA	FL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="50.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="320.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR WILLIAM G MCLAUGHLIN 336		Date of Receipt
Mailing Address 1510 E PALM AVE APT A314		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.40371
TAMPA	FL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="50.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="370.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="135.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 49 OF 102
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. MISS SUSAN MCMASTER 906			Date of Receipt
Mailing Address 14921 ROMA DR			<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.40378
LA MIRADA	CA	90638	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="35.00"/>
Name of Employer	Occupation		
EDUCATION FIELD	TEACHER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="255.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. BURTON MCPHEETERS 691			Date of Receipt
Mailing Address 23998 S MCPHEETERS RD			<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.40386
GOTHENBURG	NE	69138	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="100.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR JEFFREY MEADOR 809			Date of Receipt
Mailing Address 2210 BENNETT AVE			<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.40392
COLORADO SPRINGS	CO	80909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="200.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="335.00"/>
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: (check only one)	PAGE 50 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. MRS MARY L MELTZER 139		Date of Receipt
Mailing Address 14 EDGECOMB RD		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Zip Code
BINGHAMTON	NY	13905
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.40397
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	HOMEMAKER	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="800.00"/>	

Full Name (Last, First, Middle Initial) B. JAMES R MICHIE 841		Date of Receipt
Mailing Address 405 12TH AVE		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
SALT LAKE CITY	UT	84103
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.40436
Name of Employer	Occupation	Amount of Each Receipt this Period
T M EQUITIES INC	REAL ESTATE INVESTOR	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="650.00"/>	

Full Name (Last, First, Middle Initial) C. JAMES R MICHIE 841		Date of Receipt
Mailing Address 405 12TH AVE		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code
SALT LAKE CITY	UT	84103
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.40435
Name of Employer	Occupation	Amount of Each Receipt this Period
T M EQUITIES INC	REAL ESTATE INVESTOR	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1150.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="950.00"/>
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 51 OF 102
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. MR DAVID MIHLFEITH 832		Date of Receipt
Mailing Address 1037 S 4TH AVE		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.40437
POCATELLO	ID	Amount of Each Receipt this Period
	83201	<input type="text" value="100.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MRS JOAN G MILAM 333		Date of Receipt
Mailing Address 2673 CENTER COURT DR		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.40439
WESTON	FL	Amount of Each Receipt this Period
	33332	<input type="text" value="75.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MRS REGINA MIRE 700		Date of Receipt
Mailing Address 34 CYCAS		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.40491
KENNER	LA	Amount of Each Receipt this Period
	70065	<input type="text" value="100.00"/>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
GULF STREAM SERVICES INC	BUSINESS OWNER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="275.00"/>
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 52 OF 102
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR JACK W MOORE 857
Full Name (Last, First, Middle Initial)

Mailing Address 64301 E SQUASH BLOSSOM LN

City TUCSON	State AZ	Zip Code 85739
----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2014

Transaction ID : SA11AI.40531

Amount of Each Receipt this Period
100.00

B. MR RICHARD C MOORES 804
Full Name (Last, First, Middle Initial)

Mailing Address 32769 INVERNESS DR

City EVERGREEN	State CO	Zip Code 80439
-------------------	-------------	-------------------

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

Name of Employer RCM INTL	Occupation BUSINESSMAN
------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2014

Transaction ID : SA11AI.40535

Amount of Each Receipt this Period
500.00

C. DR CRAIG MORGAN 257
Full Name (Last, First, Middle Initial)

Mailing Address 1611 13TH AVE

City HUNTINGTON	State WV	Zip Code 25701
--------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation DOCTOR
-----------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	02	/	2014

Transaction ID : SA11AI.40553

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 53 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. COL JOHN E MURRAY 782
 Full Name (Last, First, Middle Initial)
 Mailing Address 10000 RHINELAND #218
 City SAN ANTONIO State TX Zip Code 78239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US MILITARY Occupation OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2014
Transaction ID : SA11AI.40607
 Amount of Each Receipt this Period
 100.00

B. MR ROBERT NEIGHBORS 358
 Full Name (Last, First, Middle Initial)
 Mailing Address 1205 HERMITAGE AVE SE
 City HUNTSVILLE State AL Zip Code 35801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.40631
 Amount of Each Receipt this Period
 25.00

C. MRS EDITH M NOWICKI 551
 Full Name (Last, First, Middle Initial)
 Mailing Address 750 MISSISSIPPI RIVER BLVD S
 City SAINT PAUL State MN Zip Code 55116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2014
Transaction ID : SA11AI.40687
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 54 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MRS EDITH M NOWICKI 551
 Full Name (Last, First, Middle Initial)
 Mailing Address 750 MISSISSIPPI RIVER BLVD S
 City SAINT PAUL State MN Zip Code 55116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.40688
 Amount of Each Receipt this Period
 50.00

B. MR JOSEPH OLIVIER 341
 Full Name (Last, First, Middle Initial)
 Mailing Address 590 CLUB MARCO CIR UNIT 202
 City MARCO ISLAND State FL Zip Code 34145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JOEY'S PIZZA Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2014
Transaction ID : SA11AI.40704
 Amount of Each Receipt this Period
 200.00

C. MR THOMAS PAPPAS 571
 Full Name (Last, First, Middle Initial)
 Mailing Address 4808 S ARDEN AVE
 City SIOUX FALLS State SD Zip Code 57103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.40764
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 285.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 55 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)
A. MR DAN PAUL 100

Mailing Address 103 WAVERLY PL

City State Zip Code
NEW YORK NY 10011

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

Name of Employer Occupation
FORT HUNTER FIRE CO HOSPITALITY ADMIN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : SA11AI.40798

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. MR CHARLES PAULSEN 958

Mailing Address 1220 FAY CIR

City State Zip Code
SACRAMENTO CA 95831

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.40801

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
C. MARY PEDLEY 278

Mailing Address 914 W 3RD ST

City State Zip Code
WASHINGTON NC 27889

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : SA11AI.40812

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. MR PAUL PEELER 784 CPA		Date of Receipt
Mailing Address 11649 LEOPARD ST STE 3		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.40813
CRP CHRISTI	TX	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="250.00"/>
Name of Employer	Occupation	
SELF EMPLOYED	ACCOUNTANT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="550.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MS MARJORIE PHIPPS 616		Date of Receipt
Mailing Address 1328 N RHODORA AVE		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.40849
WEST PEORIA	IL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="45.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="215.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MRS ANTHONY POGODZINSKI 545		Date of Receipt
Mailing Address 9609 MANITOU PARK DR		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.40876
MINOCQUA	WI	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="300.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="595.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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 57 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. MRS KAY POITRAS 338		Date of Receipt
Mailing Address 949 HAMILTON CIR		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.40883
HAINES CITY	FL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="250.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR RICHARD PUCKETT 617		Date of Receipt
Mailing Address 1910 LONGWOOD LN		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.40925
BLOOMINGTON	IL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="1000.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR RICHARD PUCKETT 617		Date of Receipt
Mailing Address 1910 LONGWOOD LN		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.40924
BLOOMINGTON	IL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="100.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1350.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 58 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)
A. MS ELIZABETH QUINLAN 662

Mailing Address 5901 W 107TH ST APT 157

City OVERLAND PARK State KS Zip Code 66207

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.40943

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
B. MS CLAIRE RAINS 941

Mailing Address 420 41ST AVE

City SAN FRANCISCO State CA Zip Code 94121

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : SA11AI.40957

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
C. MS CLAIRE RAINS 941

Mailing Address 420 41ST AVE

City SAN FRANCISCO State CA Zip Code 94121

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2014
Transaction ID : SA11AI.40958

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MS CLAIRE RAINS 941
Full Name (Last, First, Middle Initial)
Mailing Address 420 41ST AVE

City SAN FRANCISCO	State CA	Zip Code 94121
-----------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

Transaction ID : SA11AI.40959

Amount of Each Receipt this Period
450.00

B. MR JOHN READ 615
Full Name (Last, First, Middle Initial)
Mailing Address 2925 BRADFORD RD

City PUTNAM	State IL	Zip Code 61560
----------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation FARMER
-----------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2014

Transaction ID : SA11AI.40986

Amount of Each Receipt this Period
250.00

C. GLENN REINDERS 530
Full Name (Last, First, Middle Initial)
Mailing Address 3479 SHERMAN RD

City JACKSON	State WI	Zip Code 53037
-----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2014

Transaction ID : SA11AI.41001

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MS CAROLINE RICE 986

Full Name (Last, First, Middle Initial)
Mailing Address 2806 SE BALBOA DR

City VANCOUVER	State WA	Zip Code 98683
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014
Transaction ID : SA11AI.41038

Amount of Each Receipt this Period
 25.00

B. MS CAROLINE RICE 986

Full Name (Last, First, Middle Initial)
Mailing Address 2806 SE BALBOA DR

City VANCOUVER	State WA	Zip Code 98683
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014
Transaction ID : SA11AI.41039

Amount of Each Receipt this Period
 10.00

C. MS CAROLINE RICE 986

Full Name (Last, First, Middle Initial)
Mailing Address 2806 SE BALBOA DR

City VANCOUVER	State WA	Zip Code 98683
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.41037

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR JOSEPH J RIDOLFO 060
Full Name (Last, First, Middle Initial)

Mailing Address 1100 POQUONOCK AVE

City WINDSOR State CT Zip Code 06095

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

Name of Employer SELF EMPLOYED Occupation DOCTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.41057

Amount of Each Receipt this Period
 200.00

B. DR ROBERT J ROBERTS 972 MD
Full Name (Last, First, Middle Initial)

Mailing Address 4888 NW BETHANY BLVD

City PORTLAND State OR Zip Code 97229

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

Name of Employer SUN COUNTY TRAINING STABL Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.41092

Amount of Each Receipt this Period
 75.00

C. DR ROBERT J ROBERTS 972 MD
Full Name (Last, First, Middle Initial)

Mailing Address 4888 NW BETHANY BLVD

City PORTLAND State OR Zip Code 97229

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

Name of Employer SUN COUNTY TRAINING STABL Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014
Transaction ID : SA11AI.41093

Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. DR ROBERT J ROBERTS 972 MD		Date of Receipt
Mailing Address 4888 NW BETHANY BLVD		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Zip Code
PORTLAND	OR	97229
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.41091
Name of Employer	Occupation	Amount of Each Receipt this Period
SUN COUNTY TRAINING STABL	PHYSICIAN	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="335.00"/>	

Full Name (Last, First, Middle Initial) B. MR RICHARD G ROBERTSON 220		Date of Receipt
Mailing Address 10510 CLIPPER DR		<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
FAIRFAX STATION	VA	22039
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.41096
Name of Employer	Occupation	Amount of Each Receipt this Period
CSC	ENGINEER	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. MR DELBERT R ROBINSON 882		Date of Receipt
Mailing Address 801 ALABAMA ST		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
LAKE ARTHUR	NM	88253
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.41106
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF EMPLOYED	IRRIGATION SALES	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="280.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="400.00"/>
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 63 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR JAMES ROOT 786
 Full Name (Last, First, Middle Initial)
 Mailing Address 215 ARMSTRONG DR
 City GEORGETOWN State TX Zip Code 78633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.41141
 Amount of Each Receipt this Period
 200.00

B. MR JACK C ROSENAU 323
 Full Name (Last, First, Middle Initial)
 Mailing Address 1177 OLD FORT DR
 City TALLAHASSEE State FL Zip Code 32301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer USMC Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.41151
 Amount of Each Receipt this Period
 50.00

C. MR RICHARD ROSSMAN 660
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 582
 City OLATHE State KS Zip Code 66051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BUSINESSMAN Occupation BUSINESSMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2014
Transaction ID : SA11AI.41171
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MISS VIRGINIA ROUSH 949
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 DEER VALLEY RD APT 2E
 City SAN RAFAEL State CA Zip Code 94903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2014
Transaction ID : SA11AI.41180
 Amount of Each Receipt this Period
 90.00

B. MISS VIRGINIA ROUSH 949
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 DEER VALLEY RD APT 2E
 City SAN RAFAEL State CA Zip Code 94903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2014
Transaction ID : SA11AI.41181
 Amount of Each Receipt this Period
 100.00

C. MRS WILLIAM RYAN 535
 Full Name (Last, First, Middle Initial)
 Mailing Address 645 S RINGOLD ST
 City JANESVILLE State WI Zip Code 53545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RYAN INC OF WISCONSIN Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2014
Transaction ID : SA11AI.41232
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	290.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR JEROME D RYAN 890
 Full Name (Last, First, Middle Initial)
 Mailing Address 806 BUCHANAN BLVD STE 115
 City State Zip Code
 BOULDER CITY NV 89005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : SA11AI.41233
 Amount of Each Receipt this Period
 250.00

B. MR JOSEPH C SCHATTEMAN 296
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 LATTICE PL
 City State Zip Code
 GREENVILLE SC 29615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.41269
 Amount of Each Receipt this Period
 25.00

C. FRANCES SCHMIDT 671
 Full Name (Last, First, Middle Initial)
 Mailing Address 1417 WILLOW RD
 City State Zip Code
 NEWTON KS 67114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.41278
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 305.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 66 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR DICK SCHOONOVER 551
 Full Name (Last, First, Middle Initial)
 Mailing Address 1160 LAKEMOOR DR
 City SAINT PAUL State MN Zip Code 55129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.41291
 Amount of Each Receipt this Period
 150.00

B. MR CHARLES SCHROEDER 920
 Full Name (Last, First, Middle Initial)
 Mailing Address 1973 BATCHELDER CT
 City EL CAJON State CA Zip Code 92020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2014
Transaction ID : SA11AI.41299
 Amount of Each Receipt this Period
 100.00

C. MR KENNETH H SCHROM 444
 Full Name (Last, First, Middle Initial)
 Mailing Address 1161 E 10TH ST
 City SALEM State OH Zip Code 44460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : SA11AI.41302
 Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR H RICHARD SCHUMACHER 101
 Full Name (Last, First, Middle Initial)
 Mailing Address 47 E 88TH ST
 City NEW YORK State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2014
Transaction ID : SA11AI.41313
 Amount of Each Receipt this Period
 25.00

B. DR PENELOPE SCOTT 210 MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 11824 FALLS RD
 City COCKEYSVILLE State MD Zip Code 21030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2014
Transaction ID : SA11AI.41325
 Amount of Each Receipt this Period
 200.00

C. MR NELSON M SEESE 228
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 WILL LN
 City BRIDGEWATER State VA Zip Code 22812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2014
Transaction ID : SA11AI.41347
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR AL SHANE 917
Full Name (Last, First, Middle Initial)

Mailing Address 2175 FOOTHILL BLVD STE B

City	State	Zip Code
LA VERNE	CA	91750

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

Name of Employer	Occupation
FINANCIAL LEARNING CENTER	FINANCIAL ADVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.41360

Amount of Each Receipt this Period
100.00

B. MR DEAN SIDBURY 273
Full Name (Last, First, Middle Initial)

Mailing Address 1436 TALBOT RD

City	State	Zip Code
PLEASANT GARDEN	NC	27313

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.41390

Amount of Each Receipt this Period
400.00

C. MRS NANCY SKELSEY 787
Full Name (Last, First, Middle Initial)

Mailing Address 3106 BARTON POINT DR

City	State	Zip Code
AUSTIN	TX	78733

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

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014
Transaction ID : SA11AI.41418

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. MR JOHN W SNAKARD 068 JR		Date of Receipt
Mailing Address 20 BOBBYS CT		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.41468
RIDGEFIELD	CT	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="75.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="330.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR WILLIAM B SNYDER 337		Date of Receipt
Mailing Address 555 5TH AVE NE PH 2		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.41483
SAINT PETERSBURG	FL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="5000.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="6000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR NICHOLAS J ST GEORGE 327		Date of Receipt
Mailing Address 971 GEORGIA AVE		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.41522
WINTER PARK	FL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="200.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="5275.00"/>
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: (check only one)	PAGE 71 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR LAWRENCE STILES 327
Full Name (Last, First, Middle Initial)

Mailing Address 1505 N CAROLWOOD BLVD

City CASSELBERRY	State FL	Zip Code 32730
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : SA11AI.41589

Amount of Each Receipt this Period
500.00

B. MRS ALICE SUMIDA 972
Full Name (Last, First, Middle Initial)

Mailing Address 2309 SW 1ST AVE APT 1545

City PORTLAND	State OR	Zip Code 97201
------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	11	/	2014

Transaction ID : SA11AI.41651

Amount of Each Receipt this Period
1000.00

C. MR DONALD KEARN SURGEON 620
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 363

City JERSEYVILLE	State IL	Zip Code 62052
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2014

Transaction ID : SA11AI.41662

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 72 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. JAMES R SWOPE 780
 Full Name (Last, First, Middle Initial)
 Mailing Address 1832 MOUNTAIN LAUREL
 City State Zip Code
 KERRVILLE TX 78028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.41684
 Amount of Each Receipt this Period
 1000.00

B. MRS LORRAINE THALER 309
 Full Name (Last, First, Middle Initial)
 Mailing Address 2074 HILLSINGER RD
 City State Zip Code
 AUGUSTA GA 30904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.41718
 Amount of Each Receipt this Period
 40.00

C. MS JEANNETTE L THERRIault 997
 Full Name (Last, First, Middle Initial)
 Mailing Address 2473 OLD RICHARDSON HWY
 City State Zip Code
 NORTH POLE AK 99705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HECTORS WELDING OFFICE WORK
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 223.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : SA11AI.41723
 Amount of Each Receipt this Period
 45.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1085.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 73 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MRS KETURAH THUNDER-HAAB 481
 Full Name (Last, First, Middle Initial)
 Mailing Address 438 PINE BRAE ST
 City ANN ARBOR State MI Zip Code 48105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014
Transaction ID : SA11AI.41748
 Amount of Each Receipt this Period
 100.00

B. MR RICHARD TOBIN 452
 Full Name (Last, First, Middle Initial)
 Mailing Address 8535 PRILLA LN
 City CINCINNATI State OH Zip Code 45255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.41765
 Amount of Each Receipt this Period
 75.00

C. MR RAYMOND G TOBIN 921
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 710218
 City SAN DIEGO State CA Zip Code 92171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2014
Transaction ID : SA11AI.41766
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. TED T TRAGER 956
Full Name (Last, First, Middle Initial)

Mailing Address 668 RUSTIC RANCH LN

City LINCOLN	State CA	Zip Code 95648
-----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2014
Transaction ID : SA11AI.41794

Amount of Each Receipt this Period
 100.00

B. MR JACK E TURNER 731
Full Name (Last, First, Middle Initial)

Mailing Address 2326 SW 122ND ST

City OKLAHOMA CITY	State OK	Zip Code 73170
-----------------------	-------------	-------------------

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

Name of Employer TURNER BROS TRUCKING CO	Occupation TRUCKER / FARMER
---	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2014
Transaction ID : SA11AI.41819

Amount of Each Receipt this Period
 100.00

C. MR CALVIN K UPP 671
Full Name (Last, First, Middle Initial)

Mailing Address 212 E ELM ST

City WELLINGTON	State KS	Zip Code 67152
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : SA11AI.41846

Amount of Each Receipt this Period
 53.00

SUBTOTAL of Receipts This Page (optional).....▶	253.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. MR VICTOR E VANDAMME 891		Date of Receipt MM / DD / YYYY 09 / 22 / 2014 Transaction ID : SA11AI.41870
Mailing Address 5113 PATRICIA AVE		Amount of Each Receipt this Period 300.00
City LAS VEGAS	State NV	Zip Code 89130
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) B. MR HARRY VAN IDERSTINE 321		Date of Receipt MM / DD / YYYY 09 / 05 / 2014 Transaction ID : SA11AI.41863
Mailing Address 812 S TIMBERLANE DR		Amount of Each Receipt this Period 100.00
City NEW SMYRNA BEACH	State FL	Zip Code 32168
FEC ID number of contributing federal political committee. C		
Name of Employer SHEIDOW BRONZE CORP	Occupation DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. MR HARRY VAN IDERSTINE 321		Date of Receipt MM / DD / YYYY 09 / 05 / 2014 Transaction ID : SA11AI.41864
Mailing Address 812 S TIMBERLANE DR		Amount of Each Receipt this Period 100.00
City NEW SMYRNA BEACH	State FL	Zip Code 32168
FEC ID number of contributing federal political committee. C		
Name of Employer SHEIDOW BRONZE CORP	Occupation DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. ELVY VARNER 933
Full Name (Last, First, Middle Initial)
Mailing Address 7505 AVENIDA VALEDOR

City BAKERSFIELD	State CA	Zip Code 93309
---------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2014

Transaction ID : SA11AI.41874

Amount of Each Receipt this Period
200.00

B. MR WALTER B VETTER 560
Full Name (Last, First, Middle Initial)
Mailing Address 520 N RICE ST

City KASOTA	State MN	Zip Code 56050
----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
298.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2014

Transaction ID : SA11AI.41891

Amount of Each Receipt this Period
25.00

C. MR KENNETH C WALDO 276 JR
Full Name (Last, First, Middle Initial)
Mailing Address 1000 DEERFIELD RD

City RALEIGH	State NC	Zip Code 27609
-----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2014

Transaction ID : SA11AI.41926

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial) A. MR KENNETH C WALDO 276 JR			Date of Receipt
Mailing Address 1000 DEERFIELD RD			<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.41927
RALEIGH	NC	27609	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="60.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="310.00"/>		

Full Name (Last, First, Middle Initial) B. JOHN T WARD 926			Date of Receipt
Mailing Address 4800 SURREY DR			<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.41967
CORONA DL MAR	CA	92625	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="150.00"/>
Name of Employer	Occupation		
WARD STABLES INC	HORSE TRAINER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>		

Full Name (Last, First, Middle Initial) C. MRS ANNIE WEEKS 352			Date of Receipt
Mailing Address 3411 ROCK LN			<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.42003
IRONDALE	AL	35210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="235.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="260.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 78 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR CHARLES P WENNERMARK 805
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 2680
 City LYONS State CO Zip Code 80540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.42028
 Amount of Each Receipt this Period
 75.00

B. MR H CLIFTON WHITEMAN 341
 Full Name (Last, First, Middle Initial)
 Mailing Address 770 GOODLETTE RD N APT 324
 City NAPLES State FL Zip Code 34102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014
Transaction ID : SA11AI.42052
 Amount of Each Receipt this Period
 35.00

C. RUSSELL WHITLARK 944
 Full Name (Last, First, Middle Initial)
 Mailing Address 516 29TH AVE
 City SAN MATEO State CA Zip Code 94403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation TAX PREPARER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2014
Transaction ID : SA11AI.42056
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 360.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR HENRY WILLARD 254
Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 3269

City SHEPHERDSTOWN	State WV	Zip Code 25443
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
09 / 19 / 2014
Transaction ID : SA11AI.42092

Amount of Each Receipt this Period
250.00

B. MR KENNETH WILLIAMS 945
Full Name (Last, First, Middle Initial)
Mailing Address 331 PEYTON DR

City HAYWARD	State CA	Zip Code 94544
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Date of Receipt
09 / 22 / 2014
Transaction ID : SA11AI.42101

Amount of Each Receipt this Period
75.00

C. MRS ROSALIE J WILLIAMSON 329
Full Name (Last, First, Middle Initial)
Mailing Address 6450 36TH LN

City VERO BEACH	State FL	Zip Code 32966
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation BUSINESSWOMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 610.00	

Date of Receipt
09 / 08 / 2014
Transaction ID : SA11AI.42102

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 80 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MR PIERS WOODRUFF 229
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 503
 City SOMERSET State VA Zip Code 22972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2014
Transaction ID : SA11AI.42155
 Amount of Each Receipt this Period
 100.00

B. MR WILBER YANA 479
 Full Name (Last, First, Middle Initial)
 Mailing Address 12348 S STATE ROAD 55
 City GOODLAND State IN Zip Code 47948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA11AI.42192
 Amount of Each Receipt this Period
 100.00

C. MS BONNIE J YOUNG 945
 Full Name (Last, First, Middle Initial)
 Mailing Address 485 JUANA AVE
 City SAN LEANDRO State CA Zip Code 94577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2014
Transaction ID : SA11AI.42210
 Amount of Each Receipt this Period
 50.00

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

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

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

FOR LINE NUMBER: PAGE 81 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. MS BONNIE J YOUNG 945
 Full Name (Last, First, Middle Initial)
 Mailing Address 485 JUANA AVE
 City SAN LEANDRO State CA Zip Code 94577
 Date of Receipt 09 / 09 / 2014
Transaction ID : SA11AI.42209
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

B. MR A EARL ZIEGLER 752
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 25402
 City DALLAS State TX Zip Code 75225
 Date of Receipt 09 / 12 / 2014
Transaction ID : SA11AI.42231
 Amount of Each Receipt this Period 400.00
 FEC ID number of contributing federal political committee. C
 Name of Employer A EARL & FRANCES E ZIEGLER FOUNDATION Occupation CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

C. MR DAVID ZINN 362
 Full Name (Last, First, Middle Initial)
 Mailing Address 720 E 6TH ST
 City ANNISTON State AL Zip Code 36207
 Date of Receipt 09 / 16 / 2014
Transaction ID : SA11AI.42236
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer SELF EMPLOYED Occupation INTERNAL MEDICINE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶ 40380.00

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

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

FOR LINE NUMBER: PAGE 82 OF 102
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. CONSOLIDATED MAILING SERVICES

Full Name (Last, First, Middle Initial)

Mailing Address 504 SHAW RD
SUITE 504

City STERLING State VA Zip Code 20166

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 503.00

Date of Receipt: 09 / 24 / 2014
Transaction ID : SA15.42295

Amount of Each Receipt this Period: 45.00

REFUND

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	45.00

**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"/> 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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. BASE CONNECT INC

Mailing Address 1155 - 15TH STREET
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - CREATIVE

003

Category/
Type

Candidate Name

VIGOP

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : **SB21B.42297**

Amount of Each Disbursement this Period

3338.98

Full Name (Last, First, Middle Initial)

B. BASE CONNECT INC

Mailing Address 1155 - 15TH STREET
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - CREATIVE

003

Category/
Type

Candidate Name

VIGOP

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 11 / 2014

Transaction ID : **SB21B.42296**

Amount of Each Disbursement this Period

10842.84

Full Name (Last, First, Middle Initial)

C. BASE CONNECT INC

Mailing Address 1155 - 15TH STREET
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - CREATIVE

003

Category/
Type

Candidate Name

VIGOP

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 11 / 2014

Transaction ID : **SB21B.42298**

Amount of Each Disbursement this Period

5759.07

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

19940.89

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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CAPITOL CAGING LLC

Mailing Address 504 SHAW RD
SUITE 504

City STERLING State VA Zip Code 20166

Purpose of Disbursement
CAGING SERVICES

001

Candidate Name

VIGOP

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : **SB21B.42299**

Amount of Each Disbursement this Period

1042.96

Full Name (Last, First, Middle Initial)

B. CENTURY DATA MAILING SERVICES

Mailing Address 1155 - 15TH STREET
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - POSTAGE

003

Candidate Name

VIGOP

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : **SB21B.42300**

Amount of Each Disbursement this Period

7227.61

Full Name (Last, First, Middle Initial)

C. CENTURY DATA MAILING SERVICES

Mailing Address 1155 - 15TH STREET
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - POSTAGE

003

Candidate Name

VIGOP

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : **SB21B.42302**

Amount of Each Disbursement this Period

21632.19

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

29902.76

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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	11	/	2014

Mailing Address 1155 - 15TH STREET
SUITE 410

Transaction ID : SB21B.42301

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

6094.32

Purpose of Disbursement
VIGOP DIRECT MAIL - POSTAGE

003
Category/ Type

Candidate Name

VIGOP

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	18	/	2014

Mailing Address 1155 - 15TH STREET
SUITE 410

Transaction ID : SB21B.42303

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

8635.48

Purpose of Disbursement
VIGOP DIRECT MAIL - POSTAGE

003
Category/ Type

Candidate Name

VIGOP

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	25	/	2014

Mailing Address 1155 - 15TH STREET
SUITE 410

Transaction ID : SB21B.42304

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

6127.13

Purpose of Disbursement
VIGOP DIRECT MAIL - POSTAGE

003
Category/ Type

Candidate Name

VIGOP

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

20856.93

--

**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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CENTURY DATA SYSTEMS CORP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

Mailing Address 1155 - 15TH STREET
SUITE 410

Transaction ID : SB21B.42305

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

2941.00

Purpose of Disbursement
DATA PROCESSING

001
Category/ Type

Candidate Name

VIGOP

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. CENTURY DATA SYSTEMS CORP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

Mailing Address 1155 - 15TH STREET
SUITE 410

Transaction ID : SB21B.42306

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

2398.79

Purpose of Disbursement
DATA PROCESSING

001
Category/ Type

Candidate Name

VIGOP

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. COLORTREE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

Mailing Address 2519 BRITTONS HILL RD

Transaction ID : SB21B.42307

City RICHMOND State VA Zip Code 23230

Amount of Each Disbursement this Period

122.63

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003
Category/ Type

Candidate Name

VIGOP

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

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

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

5462.42

--

**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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. COLORTREE

Mailing Address 2519 BRITTONS HILL RD

City RICHMOND State VA Zip Code 23230

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

Category/
Type

Candidate Name
VIGOP

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

Date of Disbursement

/ /

Transaction ID : SB21B.42308

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW RD
SUITE 504

City STERLING State VA Zip Code 20166

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

Category/
Type

Candidate Name
VIGOP

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

Date of Disbursement

/ /

Transaction ID : SB21B.42310

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW RD
SUITE 504

City STERLING State VA Zip Code 20166

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

Category/
Type

Candidate Name
VIGOP

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

Date of Disbursement

/ /

Transaction ID : SB21B.42312

Amount of Each Disbursement this Period

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 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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CONSOLIDATED MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2014

Mailing Address 504 SHAW RD
SUITE 504

Transaction ID : SB21B.42311

City STERLING State VA Zip Code 20166

Amount of Each Disbursement this Period

10000.00

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003
Category/ Type

Candidate Name

VIGOP

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. CONSOLIDATED MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

Mailing Address 504 SHAW RD
SUITE 504

Transaction ID : SB21B.42313

City STERLING State VA Zip Code 20166

Amount of Each Disbursement this Period

4714.86

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003
Category/ Type

Candidate Name

VIGOP

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. DONOR BUREAU

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

Mailing Address 1900 N CULPEPPER ST

Transaction ID : SB21B.42315

City ARLINGTON State VA Zip Code 22207

Amount of Each Disbursement this Period

496.71

Purpose of Disbursement
VIGOP LIST ENHANCEMENT

003
Category/ Type

Candidate Name

VIGOP

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

15211.57

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

--

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

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

FOR LINE NUMBER:
(check only one)

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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DONOR BUREAU

Mailing Address 1900 N CULPEPPER ST

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement
VIGOP LIST ENHANCEMENT

003

Candidate Name

VIGOP

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 11 / 2014

Transaction ID : **SB21B.42316**

Amount of Each Disbursement this Period

1009.85

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE #806

City FAIRFAX State VA Zip Code 22040

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

VIGOP

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2014

Transaction ID : **SB21B.42317**

Amount of Each Disbursement this Period

176.33

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE #806

City FAIRFAX State VA Zip Code 22040

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

VIGOP

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2014

Transaction ID : **SB21B.42318**

Amount of Each Disbursement this Period

9.95

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

1196.13

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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE #806

City State Zip Code
FAIRFAX VA 22040

Purpose of Disbursement
SERVICE CHARGE

001
Category/
Type

Candidate Name
VIGOP

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2014

Transaction ID : SB21B.42319

Amount of Each Disbursement this Period

279.69

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE #806

City State Zip Code
FAIRFAX VA 22040

Purpose of Disbursement
CUSTOM CREDIT BILLING

001
Category/
Type

Candidate Name
VIGOP

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2014

Transaction ID : SB21B.42320

Amount of Each Disbursement this Period

75.25

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE #806

City State Zip Code
FAIRFAX VA 22040

Purpose of Disbursement
CUSTOM CREDIT BILLING

001
Category/
Type

Candidate Name
VIGOP

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2014

Transaction ID : SB21B.42321

Amount of Each Disbursement this Period

25.00

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

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

379.94

**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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE #806

City State Zip Code
FAIRFAX VA 22040

Purpose of Disbursement
CUSTOM CREDIT BILLING

001

Category/
Type

Candidate Name

VIGOP

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2014

Transaction ID : **SB21B.42322**

Amount of Each Disbursement this Period

114.00

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE #806

City State Zip Code
FAIRFAX VA 22040

Purpose of Disbursement
TRANSFIRST BILLING

001

Category/
Type

Candidate Name

VIGOP

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2014

Transaction ID : **SB21B.42323**

Amount of Each Disbursement this Period

523.72

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE #806

City State Zip Code
FAIRFAX VA 22040

Purpose of Disbursement
TRANSFIRST BILLING

001

Category/
Type

Candidate Name

VIGOP

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2014

Transaction ID : **SB21B.42324**

Amount of Each Disbursement this Period

10.00

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

647.72

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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DRIVE #806

City State Zip Code
FAIRFAX VA 22040

Purpose of Disbursement
TRANSFIRST BILLING

001
Category/
Type

Candidate Name
VIGOP

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.42325

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. INTEGRAM

Mailing Address 8421 HILLTOP RD

City State Zip Code
FAIRFAX VA 22031

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003
Category/
Type

Candidate Name
VIGOP

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.42327

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. LEGACY LIST MANAGEMENT CORP

Mailing Address 1155 - 15TH STREET
SUITE 410

City State Zip Code
WASHINGTON DC 20005

Purpose of Disbursement
VIGOP LIST RENTALS

003
Category/
Type

Candidate Name
VIGOP

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.42328

Amount of Each Disbursement this Period

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 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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. LEGACY LIST MANAGEMENT CORP

Mailing Address 1155 - 15TH STREET
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

Category/
Type

Candidate Name
VIGOP

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

Date of Disbursement

/ /

Transaction ID : SB21B.42329

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DR
#806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

Category/
Type

Candidate Name
VIGOP

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

Date of Disbursement

/ /

Transaction ID : SB21B.42330

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. PATTON-KIEHL GROUP INC

Mailing Address PO BOX 590

City THORNBURG State VA Zip Code 22565

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

Category/
Type

Candidate Name
VIGOP

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

Date of Disbursement

/ /

Transaction ID : SB21B.42331

Amount of Each Disbursement this Period

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 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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. SIMPKINS ESCROW SERVICES LLC

Mailing Address 29*243 ST JUST DR

City UNIONVILLE State VA Zip Code 22567

Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name

VIGOP

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : SB21B.42333

Amount of Each Disbursement this Period

409.91

Full Name (Last, First, Middle Initial)

B. WEST END PRINTING CO

Mailing Address 1609 SHERWOOD AVE

City RICHMOND State VA Zip Code 23220

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

VIGOP

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 11 / 2014

Transaction ID : SB21B.42334

Amount of Each Disbursement this Period

3737.10

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

4147.01

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

123596.56

**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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO ELECT GARY COBB TO CONGRESS

Mailing Address PO BOX 1426

City State Zip Code
CHERRY HILL NJ 08034

Purpose of Disbursement
FEDERAL CONTRIBUTION

011

Candidate Name

GARY COBB

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NJ District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	4

Transaction ID : **SB23.42349**

Amount of Each Disbursement this Period

2	5	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MIA LOVE

Mailing Address PO BOX 255

City State Zip Code
RIVERTON UT 84065

Purpose of Disbursement
FEDERAL CONTRIBUTION

011

Candidate Name

MIA LOVE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: UT District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	4

Transaction ID : **SB23.42350**

Amount of Each Disbursement this Period

5	0	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. GLO FOR CONGRESS

Mailing Address 133 SOUTH HARBOR DR

City State Zip Code
VENICE FL 34285

Purpose of Disbursement
FEDERAL CONTRIBUTION

011

Candidate Name

GLOREATHA SCURRY-SMITH

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	4

Transaction ID : **SB23.42351**

Amount of Each Disbursement this Period

2	5	0	0	0	0
---	---	---	---	---	---

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

1	0	0	0	0	0
---	---	---	---	---	---

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

1	0	0	0	0	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input 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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. HURD FOR CONGRESS

Mailing Address PO BOX 656

City HELOTES State TX Zip Code 78023

Purpose of Disbursement
FEDERAL CONTRIBUTION

011

Candidate Name

WILLIAM HURD

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 23

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : SB23.42354

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. MOONEY FOR CONGRESS

Mailing Address PO BOX 1863

City MARTINSBURG State WV Zip Code 25402

Purpose of Disbursement
FEDERAL CONTRIBUTION

011

Candidate Name

ALEXANDER XAVIER MOONEY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WV District: 02

Date of Disbursement

MM / DD / YYYY
09 / 11 / 2014

Transaction ID : SB23.42347

Amount of Each Disbursement this Period

2400.00

Full Name (Last, First, Middle Initial)

C. TIM SCOTT FOR SENATE

Mailing Address 1405 ASHLEY RIVER RD

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement
FEDERAL CONTRIBUTION

011

Candidate Name

TIMOTHY E SCOTT

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: SC District: 00

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : SB23.42355

Amount of Each Disbursement this Period

5000.00

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

12400.00

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

22400.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JACKIE WINTERS

Mailing Address PO BOX 126

City SALEM State OR Zip Code 97308

Purpose of Disbursement
STATE CONTRIBUTION

011

Candidate Name

JACKIE WINTERS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : SB29.42356

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JOHN D ANTHONY

Mailing Address PO BOX 828

City MORRIS State IL Zip Code 60450

Purpose of Disbursement
STATE CONTRIBUTION

011

Candidate Name

JOHN D ANTHONY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : SB29.42358

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JOHN D ANTHONY

Mailing Address PO BOX 828

City MORRIS State IL Zip Code 60450

Purpose of Disbursement
STATE CONTRIBUTION

011

Candidate Name

SCOTT TURNER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : SB29.42367

Amount of Each Disbursement this Period

1000.00

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 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

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)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. JAMES WHITE CAMPAIGN

Mailing Address PO BOX 21

City HILLISTER State TX Zip Code 77624

Purpose of Disbursement
STATE CONTRIBUTION

011

Candidate Name

JAMES WHITE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : **SB29.42360**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. JANE POWDRELL-CULBERT FOR STATE REP

Mailing Address 114 RICHARD RD

City CORRALES State NM Zip Code 87048

Purpose of Disbursement
STATE CONTRIBUTION

011

Candidate Name

JANE E POWDRELL-CULBERT

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : **SB29.42362**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MIKE HILL REPUBLICAN FOR STATE REP

Mailing Address PO BOX 16229

City PENSACOLA State FL Zip Code 32507

Purpose of Disbursement
STATE CONTRIBUTION

011

Candidate Name

MIKE HILL

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2014

Transaction ID : **SB29.42365**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

6000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 99 OF 102
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BASE CONNECT INC	Nature of Debt (Purpose): DIRECT MAIL - CREATIVE
Mailing Address 1155 - 15TH STREET SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 69462.62	Transaction ID : SD10.7789	
Amount Incurred This Period 30936.67	Payment This Period 19940.89	Outstanding Balance at Close of This Period 80458.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAPITOL CAGING LLC	Nature of Debt (Purpose): CAGING SERVICES
Mailing Address 504 SHAW RD SUITE 504	
City State Zip Code STERLING VA 20166	

Outstanding Balance Beginning This Period 660.45	Transaction ID : SD10.37640	
Amount Incurred This Period 1042.96	Payment This Period 1042.96	Outstanding Balance at Close of This Period 660.45

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CENTURY DATA SYSTEMS CORP	Nature of Debt (Purpose): DATA PROCESSING
Mailing Address 1155 - 15TH STREET SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 12574.60	Transaction ID : SD10.7791	
Amount Incurred This Period 5339.79	Payment This Period 5339.79	Outstanding Balance at Close of This Period 12574.60

1) SUBTOTALS This Period This Page (optional)..... ▶	93693.45
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 100 OF 102
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE	Nature of Debt (Purpose): DIRECT MAIL - PRINTING & MAILSHOP
Mailing Address 2519 BRITTONS HILL RD	
City State Zip Code RICHMOND VA 23230	

Outstanding Balance Beginning This Period 6520.87	Transaction ID : SD10.37641	
Amount Incurred This Period 4876.93	Payment This Period 4876.93	Outstanding Balance at Close of This Period 6520.87

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CONSOLIDATED MAILING SERVICES	Nature of Debt (Purpose): DIRECT MAIL - PRINTING & MAILSHOP
Mailing Address 504 SHAW RD SUITE 504	
City State Zip Code STERLING VA 20166	

Outstanding Balance Beginning This Period 90315.83	Transaction ID : SD10.7792	
Amount Incurred This Period 38370.43	Payment This Period 24313.59	Outstanding Balance at Close of This Period 104372.67

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor DONOR BUREAU	Nature of Debt (Purpose): LIST ENHANCEMENT SERVICES
Mailing Address 1900 N CULPEPPER ST	
City State Zip Code ARLINGTON VA 22207	

Outstanding Balance Beginning This Period 3858.17	Transaction ID : SD10.7798	
Amount Incurred This Period 1760.60	Payment This Period 1506.56	Outstanding Balance at Close of This Period 4112.21

1) SUBTOTALS This Period This Page (optional)..... ▶	115005.75
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 101 OF 102
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor INTEGRAM	Nature of Debt (Purpose): DIRECT MAIL - PRINTING & MAILSHOP
Mailing Address 8421 HILLTOP RD	
City State Zip Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 3872.58	Transaction ID : SD10.37645	
Amount Incurred This Period 5551.22	Payment This Period 2238.39	Outstanding Balance at Close of This Period 7185.41

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LEGACY LIST MANAGEMENT CORP	Nature of Debt (Purpose): DIRECT MAIL - LIST RENTALS
Mailing Address 1155 - 15TH STREET SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 43036.49	Transaction ID : SD10.15277	
Amount Incurred This Period 3024.32	Payment This Period 5854.88	Outstanding Balance at Close of This Period 40205.93

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MACKENZIE & COMPANY	Nature of Debt (Purpose): CONSULTING - COMPLIANCE
Mailing Address 2776 S ARLINGTON MILL DR #806	
City State Zip Code ARLINGTON VA 22206	

Outstanding Balance Beginning This Period 6608.80	Transaction ID : SD10.7794	
Amount Incurred This Period 745.60	Payment This Period 975.40	Outstanding Balance at Close of This Period 6379.00

1) SUBTOTALS This Period This Page (optional)..... ▶	53770.34
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) ▶	