

Napa County Republican Party P.O. Box 3263 Napa, CA 94558 (707) 226-9151 napagop.org

August 4, 2014

Mr. David Butler Senior Campaign Finance Analyst Federal Election Commission 999 E Street N.W. Washington, D.C. 20463 RECEIVED 2014 AUG 11 AM 6: 54

RE: AMENDED YEAR -END REPORT (10/01/2013-12/31/13)

Dear Mr. Butler:

Herewith is the amended report for the filing period 10/01/2013-12-31-2013. It is, in fact, the report I thought I had originally sent to you.

The two subsequent filings do not require amending because the data on them was taken from the correct report.

As to the report previously filed with you for the period in question, I have no reasonable explanation and sincerely apologize.

Sincerely,

Joseph Blevins, Treasurer

Napa County Republican Party

4166 Burgundy Way

Napa, CA 94558

ISON INCOMENDS

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

2014 AUG 11 AM 6:54

EFF MALI Office Use Only

. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

NARA COUNTY TEEPUBLICAN CONTRAL COMMITTEE
ADDRESS (number and street) P.O. BOX 3263
Check if different than previously reported. (ACC) NAPA NAPA VAI 94558
2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
CO.0.4.55.6.5.9 3. IS THIS NEW AMENDED REPORT (N) OR (A) .
(choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) Quarterly Report (Q2) Quarterly Report (Q2) 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 (Pab 20 (M2)
5. Covering Period 10 81 2013 through 12 3.1 2013
certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Signature of Treasurer ASCPH BLEVINS Date BB B9 2019 NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.
Office Use Only

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SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

	FEC Form 3X (Rev. 02/2003)		Page 2
W	ite or Type Committee Name		
_	NAPA COUNTY REPUT	BLICAN CENTRAL COM	MITTEE
Re	port Covering the Period: From:	D 2013 To:	12 31 2013
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5 .	(a) Cash on Hand January 1, ZO/3		3,8,4,0.00
	(b) Cash on Hand at Beginning of Reporting Period	3329.00	
	(c) Total Receipts (from Line 19)		69.7.0,0
	(d) Subtotal (add Lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3,829.00	
7.	Total Disbursements (from Line 31)	550,00	1258.00
3.	Cash on Hand at Close of	٠,	•
	Reporting Period (subtract Line 7 from Line 6(d))	3.27.9.00	3,2.7.9.00
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	e.ee	

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

ALADD	COUNTY	REPUBLICAN	CENTON	CAMMITTEE
NINPH	LUUNIT	KEIUBLILAN	LL/VIKIL	COMMITTICA

Report Covering the Period:

TATOM: TINO: NINNO

From:

10 81 2013

To:

12 31 2013

	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		harout and another the section of th
	(i) Itemized (use Schedule A)	8.00	900
	· .		
	(ii) Unitemized	6.00	67,1.00
	(iii) TOTAL (add		(80)
	Lines 11(a)(i) and (ii)▶	6.00	
	(b) Political Party Committees	P-00	e^{ω}
	(c) Other Political Committees		
	(such as PACs)	0.00	8.00
	(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry	terminant management promite mention and the mention and the mention and the second mention	
	Totals to Line 33, page 5)	8.DO	69700
12.	Transfers From Affiliated/Other		
	Party Committees	800	DO0
13.	All Loans Received	0.00	0.00
•			
	Loan Repayments Received	0.00	<i>0.00</i>
15.	Offsets To Operating Expenditures		
	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)	+.00	
16.	Refunds of Contributions Made	.1	
	to Federal Candidates and Other		
	Political Committees	L.,, A. CO	
17.	Other Federal Receipts	Served and a served	Language worthware Language Language Language Commission of Comment
	(Dividends, Interest, etc.)	0.00	θ
18.	Transfers from Non-Federal and Levin Funds	SASSECTION OF THE CONTROL OF THE CON	######################################
	(a) Non-Federal Account		โดยละเรื่องจะเรื่องและร่วยเละเรื่องสะเร็บสะเราในความในการเร็บสะเรลิการ่างเรื่องเล เก็บสามาร่า
	(from Schedule H3)	2.00	Landard Production of Producti
	(b) Levin Funds (from Schedule H5)		L
	(a) Tatal Transfers (add 40(a) and 40(b))	transferred and an extension of the state of	
	(c) Total Transfers (add 18(a) and 18(b))		L. 4.00
			·
19.	Total Receipts (add Lines 11(d),		
	12, 13, 14, 15, 16, 17, and 18(c))▶	. A.O.D	697.00
		Linear and a secretified and of a short amount of the state of the constitution of the state of	Congression and Linearia Commission of Section (C. Sect. Temperature Commission Commissi
20.	Total Federal Receipts		
	(subtract Line 18(c) from Line 19)▶	6.00	697.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

•	II. Disbursements	COLUMN A Total This Period	COLUMN B
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Amenda IIII2 Leurine de marile de ma	Calendar Year-to-Date
,	(i) Federal Share	6.00	6.00
	(ii) Non-Federal Share	5.00	θ .00
	(b) Other Federal Operating		
	Expenditures(c) Total Operating Expenditures	Ed)	8.00
	(add 21(a)(i), (a)(ii), and (b))▶	9.00	6.00
22.	Transfers to Affiliated/Other Party		
23	Committees	1	I am
	Federal Candidates/Committees and Other Political Committees	A,00	0.00
24.	Independent Expenditures	V VV	A 04
25 .	(use Schedule E)	() 00	
	(use Schedule F)		
26.	Loan Repayments Made	e 06	0. 00
	Loans Made		0.00
28.	Refunds of Contributions To: (a) Individuals/Persons Other	According to the control of the cont	
	Than Political Committees	2.00	beauth and real to an income product the second control of the second product the second
	(b) Political Party Committees	A. 00	
	(such as PACs)	B.00	<i>e.oo</i>
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	hadradada da d	100 Acres 100 Ac
29.	Other Disbursements		1,258.00
30.	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity .(from Schedule H6)		Committee security and the second security of the second s
	(i) Federal Share	406	80
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	£05	26.00
	With Federal Funds	em	
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	ea	8.00
24	Total Diaburaamenta (add Lines 04/a) 00		
3 1.	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	550.00	1,258.00
32	Total Federal Disbursements	·	a second
J _ .	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	550.00	125800
		•	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

111.	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)		
-	Total Contribution Refunds (from Line 28(d))		B.00
	Net Contributions (other than loans) (subtract Line 34 from Line 33)		,6,9,7.00
	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	55.0.0D	1,258,00
37.	Offsets to Operating Expenditures (from Line 15, page 3)		
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	,5 <u>5,0,00</u>	1.25,8.00

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	3	

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 15
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(CRECK ONLY ONE)
		13 14 15 18 17
Any information copied from such Reports and Statements more for commercial purposes, other than using the name and		
NAME OF COMMITTEE (In Full)	,,,	
NAPA COUNTY REPUBLIC	CAN CENTERL C	OMMITTEE
Full Name (Last, First, Middle Initial)		
Mailing Address		Date of Receipt
City State	Zip Code	
State	Zip Code	Amount of Each Receipt this Period
fed and political computes	and the second s	The state are supplied to the
Name of Employer Occupation	n	-
Receipt For: Aggregate	Year-to-Date ▼	-
Primary General Other (specify)	e i siste e en presidente presidente presidente messi presidente e	
Sequential, of	- Proceeding Poorts, when the Assessed could	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address	1.	MENT / SOMOT / SALLAND AND A
City State	Code Code	- I have be to be to be to be and
SEC ID number of contributing	the grown fact of proving the configuration proving	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Superior Superior States	To suffer the Proceedings & Process Section & Santas
Name of Employer Occupatio	n	
	Year-to-Date ▼	7
Other (specify)	The same the same to same the same than the same	
	a de la descripción de la constante de la cons	
Full Name (Last, First, Middle Initial) 2.		Date of Receipt
Malling Address		the state of the same
City State	Zip Code	Amount of San Board this Board
FEC ID number of contributing	the colonia politica de la respectación de la factorio de la respectación de la factorio de la respectación de	Amount of Each Receipt this Period
todaral political committee	are tree in terre of war trees. The west would	contraction Personal and beautiful and and and
Name of Employer Occupation		
	Year-to-Date ▼	1
Other (specify)	وما فالجيد الرسوية المروسة مردماه والحقادي المعقي الحادثين	
Lamb of a	Plane Committee Promittee on Some Programme of	
SUBTOTAL of Receipts This Page (optional)	·····	De la Companya del Companya de la Companya del Companya de la Comp
TOTAL This Period (last page this line number only)		BOO

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE OF 15	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	ate schedule(s) (check only one)		
	Detailed Summary Page	216	22 23 24 25 26 28a 28b 28c 29 3Cb	
Any information copied from such Reports and Statem	ients may not be sold or used	by any perso		
or for commercial purposes, other than using the nam	e and address of any political	committee to	solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
NATA COUNTY REPUB	LICAN CENTRA	L CO	MITIEE	
A. Full Name (Last, First, Middle Initial)			Date of Disbursement	
~· \				
Mailing address			W W / O D / Y / Y - Y V	
City	State Zip Code			
Purpose of Disbursement				
			Amount of Each Disbursement this Period	
Candidate Name		Category/ Type	The first of the second of the	
Office Sought: House Disbursen	nent For:	.,,,,	The state of the s	
	Primary ☐ General Other (specify) ▼			
State: District:		j		
Full Name (Last, First, Middle Initial)	Kn			
В.			Date of Disbursement	
Mailing Address				
City	State Zip Code			
Purpose of Disbursement		nagarang comp		
	\	amilia are to a co	Amount of Each Disbursement this Period	
Candidate Name		Category/ Type	Signatural and Color of Source and source Source Source Source Season States Source So	
Office Sought: House Disbursen	nent For:	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Tomor to regulation Memoritarization 18 anti-contra Massatters and	
 1 	Primary General			
State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)	· · · · · · · · · · · · · · · · · · ·			
C.			Date of Disbursement	
Mailing Address			The view of the vi	
City	State Zip Code		and the second of the second o	
Purpose of Disbursement	· · · · · · · · · · · · · · · · · · ·			
			Amount of Each Disbursement this Period	
Candidate Name Category/		time above the in the anti- above the property of the said		
Office Sought: House Disbursen	nent For:	Туре	many water the Blog Bear Barre Brown to the Complete and	
Senate	Primary General			
President State: District:	Other (specify) ▼		\	
State. District.			State for section of the first feet where the section of the section of	
SUBTOTAL of Disbursements This Page (optional)			divi	
TOTAL THE DESIGNATION OF THE STATE OF THE ST			800	
TOTAL This Period (last page this line number only).		······ >	The fact of the Property of the State of the Confession of the Con	

SCHEDULE C (FEC FORM 3)	()			
LOANS		Use separate schedule(s)		
		for each category of the Detailed Summary Page	FOR LINE 13 OF FORM 3X	
NAME OF COMMITTEE (In Full)		<u> </u>	<u> </u>	
NAPA COUNTY	DEPITRI ICALI	CAITTON COL	MM ITTEF	
OAN SOURCE Full Name (Last, Fir	st, Middle Initial)		Tection:	
			Primary	
Mailing Address			General Other (specify)	
Maining Address		ال	Onition (Specify)	
City	State ZIP Co	ode		
Original Amount of Loan	Cumulative Payment To		Outstanding at Close of This Period	
The man and the Beth of the months with men than the			egic teginis (gram), ming crigari egenegaminganing	
TERMS Date incurred	Date Due		Secured:	
LANGE LANGE AND		4 1		
Successional Successional Constitution of the		estropicat recognisticanos. Es constru andresa tiber	% (apr) Yes No	
List All Endorsers or Guarantors (N. 1. Full Name (Last, First, Middle Initial)	•	Name of Employer		
1. 1 2. 114.110 (2451, 1 1151, 111516 11111		Traine or Employer		
Mailing Address		Occupation		
		Amount	in igram (ming his manara) in i hayarma	
City	tate ZIP Oode	Guaranteed	have I was trees them to me the contrared	
2. Full Name (Last, First, Middle Initia		Name of Employer		
	The state of the s			
Mailing Address		Occupation		
}	•	Amount page growns are y	anearly, was be entable each for such that will have a bearing	
City	tate ZIP Code	Oyaranteed	eginalment of one Pennalment brown to an Image	
3. Full Name (Last, First, Middle Initia	il)	Name of Employer		
				
Mailing Address		Occupation		
		Amount	e sen elimentalibre e estre pe al le encolle en es demas al lemane	
City	tate ZIP Code	Guaranteed Outstanding:	to constance of the control of our trace of the contract	
4. Full Name (Last, First, Middle Initia	1)	Name of Employer		
Mailing Address		Occupation	\	
City	tate ZIP Code	Amount Guaranteed	erner der sein Server geropen bes in alban er channe h eben ba	
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		for the effective two	ngarang pangangan pangang ing pangang pangang pangan pangan pangan pangan pangan pangan pangan pangan pangan p	
SUBTOTALS This Period This Page (opt	ional)			
TOTALS This Period (last page in this lin	1e only)		The second secon	
Carry outstanding balance only to LINE	3 Schadula D. for this ilea !!			
Dairy outstanding parance only to LINE	w, actionate w, for this find. If	ing schodule b, carry forwar	u to appropriate line of Summary.\	

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

7 01	(2)
Supplemen	itary for
Information	found on
Page	of Schedule

Federal Election Commission, Washington, D.C. 20463			Page of Schedule C
NAME OF COMMITTEE (In Full)	·	FEC	DENTIFICATION NUMBER
	lc.	00455659	
NAPA COUNTY REPUBLICAN C	CENTRAL COMMITT	EE	
LENDING INSTITUTION (LENDER) For Name	Amount of Loan		Interest Rate (APR)
ruu Name			%
	Sandrada Danley	4	
Mailing Address	Date Insurand on Fatablish an	and.	LATATAS I
	Date Incurred or Established		LOTO TOTAL
City State Zip Code	Oate Due		
A. Has loan been restructured? No Yes	If yes, date originally incurre	ed (Trans	0.00
B. If line of credit,	Total		
Amount of this Draw:	Outstanding Balance:		
C. Are other parties secondarily liable for the debt incur No Yes (Endorsers and guarantors m	red? nust be reported on Schedule C.)	
D. Are any of the following pledged as collateral for the	loan: real estate, personal	` _ · · · · · · · · · · · · · · · · · · 	value of this collateral?
property, goods, negotiable instruments, sertificates of stocks, accounts receivable, cash on deposit, or other	of deposit, chattel papers, ar similar traditional collateral?	-	
No Yes If yes, specify:		13.	
			der have a perfected security
E. Are any future contributions or future receipts of intel	est income pladned as	interest in it?	
	specify:	vvnat is the	estimated value?
			alanda Dadanda Dadan
	Location of account:		
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Education of account.		
Date account established:	Address:		
المممدمين الهمول المميديا	City, State, Zip:	· · · · · · · · · · · · · · · · · · ·	
F. If neither of the types of collateral described above w		amount plade	ad does not asual as avecad
the loan amount, state the basis upon which this loan	n was made and the basis of w	hich it assures	repayment.
	`		
G. COMMITTEE TREASURER		DATE	
Typed Name		- Jan.	المعمدمين المهديق
Signature	•	1	
H. Attach a signed copy of the loan agreement.			<u> </u>
I. TO BE SIGNED BY THE LENDING INSTITUTION:			
 To the best of this institution's knowledge, the tare accurate as stated above. 	·		
II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed similar extensions of credit to other borrowers of comparable credit worthiness.			time than those imposed for
III. This institution is aware of the requirement that	a loan must be made on a bas	is which assure	s repayment, and has
complied with the requirements set forth at 11 (AUTHORIZED REPRESENTATIVE	UEN 100.02 and 100,142 in mak	DATE	
Typed Name			Level Level 244
Signature T	itle		
į l			7

SCHEDULE D (FEC Form 3X)	(Use separate	PAGE 10 OF 15
DEBTS AND OBLIGATIONS	schedule(s)	FOR LINE NUMBER:
Excluding Loans	for each numbered line)	(check only one) 9
NAME OF COMMITTEE (In Full)		
NAPA COUNTY REPUBLICAN CENTRAL	COMMITTE	E
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of D	ebt (Purpose):
	}	
Mailing Address		·
City State Zip Code		
Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period	Quistandir	ng Balance at Close of This Period
Amount Incurred This Period Payment This Period		an dester from the confer and a section of present and an end
To rather relative Description From Prince Court Court of the Attended To Town From The relative relation - Prince Assessment of	the same of the same of	net Price Person Con Print Net to France Consideration
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of D	ebt (Purpose):
Mailing Address		
City State Zip Code		
Outstanding Balance Beginning This Period Amount Incurred This Period Payment his Period Payment his Period	Service for an American state when	ng Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of D	ebt (Purpose):
Mailing Address		
City State Zip Code		
Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Payment This Period	han togeth transferred	
1) SUBTOTALS This Period This Page (optional)	burnels	man igne en april e ga e de grant e fano en fan en fan en fanoamen. Mei trop en de en an fan en 18 de en en fan en fan en fanoamen.
2) TOTALS This Period (last page this line number only)	b	a a Basa ka madan a Bora Na ra ya a Barribana
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	>	magaing ampang yang girang againg ang ang ang ang ang ang ang ang ang a
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page of		

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

EMIZED INDEPENDENT EXPENDITURES	PAGE [] OF [5] FOR LINE 24 OF FORM 3X
IAME OF COMMITTEE (In Full)	C IDENTIFICATION NUMBER V
NAPA COUNTY REPUBLICAN CENTER COMM.	00455659
Check if 24-hour report 48-hour report New report Amends report filed on	4 1 9 1 9 1 1 1 1 1 1 1 1 1
Full Name (Last, First, Middle Initial) of Payee Date	
Mailing Address	(8 TO) (8 TO)
Amount	
City State Zip Code	and the second s
Purpose of Expenditure Category/ Type Office Sought:	House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: Check One:	President Support Oppose
Calendar Year-To-Date Per Election Disbursement Disbursement Other	For: Primary General
Full Name (Last, First, Middle Initial) of Payee Date	
Mailing Address	W / O - B / V - D - D - D - D - D - D - D - D - D -
Amount	
City State Cip Code	lacan terror dans dans a dans a dans Terrar dans
Purpose of Expenditure Category Type	House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: Check One:	President Oppose
Calendar Year-To-Date Per Election for Office Sought	For: Primary General r (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	and the second s
(b) SUBTOTAL of Unitermized Independent Expenditures	
(c) TOTAL Independent Expenditures	and the few than in the last of
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cocwith, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Date	1778 , TALALA 14
Signature	V

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

U.S.C. §441a(d))			<u> </u>
(To be used or	nly by Political Committees in the Ge	eneral Election)	FOR LINE 25 OF FORM 3X
ME OF COMMITTEE (In Full)			
NADA COUNTY REPL	IBLICAN CENTRI	4 COMI	NITTEE
as your committee been designated to make	Full Name of Subordinate Committee	90	
ordinated expenditures by a political party committee YES NO	?		
YES, name the designating committee:	Mailing Address		
	City	Sta	te ZIP Code
Full Name (Last, First, Middle Initial) of Each Paye		Purpose of Exp	anditure
Toll Name (East, First, Middle Illitial) of Each Faye	0	, arposo or amp	anditure
			Category/
Mailing Address		Date	Туре
City Sta	ite Zip Code		Rush Rud / Tukusi Autu Autu Aut
	· · · · · · · · · · · · · · · · · · ·	- I	mentioned and animal and
Name of Federal Candidate Supported Office So	· -	Amount	
	Senate District:	- Im through the day	erer forestering acompany and seem refusers that contributioned
Annual Control Election	- marketon in Superior Superio	23. San Carlo Color	Samuel south worth or aligned Assert Survey Company
Aggregate General Election Expenditure for this Candidate	-controller of the state of the		
		Purpose of Expe	poditura
Full Name (Last, First, Middle Initial) of Each Paye	•	Fulpose of Exp	STIGITOTO CONTRACTOR OF THE PARTY OF THE PAR
	a)	Category/
Mailing Address		7	Туре
City Ste	ate Zip Code	Date	anktanii yoğlukki kessekesekel
l ·			ga demanda a garan da ga a da g
Name of Federal Candidate Supported Office So		Amount	7.10.10.10.10.10.10.10.10.10.10.10.10.10.
\	Senate District:	- James of tree abstractive	en en film en meditar, en en direct distancia basilinan ego director director director an
Aggregate General Election	ELASIONETION 1	- Inducate	market in the case of the conference of the conference
Expenditure for this Candidate	and the same of th	1	
		Durana at Fire	
Full Name (Last, First, Middle Initial) of Each Paye		Purpose of Exp	enditure
·		\vee	Category/
Mailing Address			Туре
City Sta	ate Zip Code	Date	of Mills (Mills)
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Name of Federal Candidate Supported Office So	ught: House State:	_ Amount	rendament - Rome Maryand executives of
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Aggregate General Election Expenditure for this Candidate			
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SUBTOTAL of Expenditures This Page (optional)		- Image where 14	Samuel of the control
OTAL This Period (last page this line number only)			

PAGE 17 OF 15

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds and Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
NAPA COUNTY REPUBLICAN CENTRAL COMMITTEE
USE ONLY ONE SECTION, A or B
A. State and Local Party Committees
Fixed Percentage (select one)
Presidential-Only Election Year (28% Federal)
Presidential and Senate Election Year (36% Federal)
Senate-Only Election Year (21% Federal)
Non-Presidential and Non-Senate Election Year (15% Federal)
A CONTRACT OF THE CONTRACT OF
B. Separate Segregated Funds and Nonconnected Committees
Flat Minimum Federal Percentage
If the committee will allocate using the flat minimum percentage of 50% federal funds, check 🛄 or
If the committee is spending more than 50% federal funds, indicate ratio below
If the committee is spending more than 50% federal funds, indicate ratio below Federal%
the state of the s
Federal

SCHEDULE H2 (FEC Form 3X)

PAGE	OF	
14		15

ALLOCATION RATIOS	•	PAGE OF 15
NAME OF COMMITTEE (In Full)		_
NAPA COUNTY PEPUBLICAN CENTR		EE
RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDA ACTIVITIES APPEARING ON THIS REPORT.	ATE SUPPORT	
Methods of allocation:		
 FUNDRAISING activities are allocated using the "funds received met expenses must equal the federal proportion of monies raised. 	thod" where the federal pro	portion of
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according where the federal proportion of disbursements is based on the benefitivity. For PACs Only: Direct candidate support includes public commenderal and nonfederal candidates, regardless of whether there is a are allocated using a time/space method.	fit derived by federal candid nunications or voter drives	dates from the ac- that refer to both
CTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
ACTIVITY IS: Floodraising Direct Candidate Support CHECK IF THE RATIO IS:	%	%
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
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ACTIVITY IS:	FEDERAL %	NONFEDERAL %
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CHECK IF THE RATIO IS:	Tempo Server Strain Commission of 19	
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Fundraising Direct Candidate Support	%	wanten describe allowed
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ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONEEDERAL &
ACTIVITY IS:	Sendings Saved	NONFEDERAL %
Fundraising Direct Candidate Support	%	%
CHECK IF THE RATIO IS: New		
ACTIVITY OF EVENT INCIDENT	<u> </u>	/
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
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Fundraising Direct Candidate Support	Marian Braston %	%
CHECK IF THE RATIO IS: New Revised Same as Previously Reported		

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGI	Ε	С)F		
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FOR	LINE	18a	OF	FORM	3X

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NAME OF COMMITTEE (In Full)				
NAPA COUNTY REPUBLICAN CENTRAL COMMITTEE.				
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ii) Genera Voter Drive		***************************************	Trong Source Local Brandonine Barris Diagnation of Society Hum	-3
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III) Exempt Activities			Sand arration Post lines Live Posts with without	أستعليه
Iv) Direct Fundralsing List Activity or Even	t (dentifler)			
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c) Total Amount Transferred For Direct F	odraising		The world words are the subspecialized the problem with an object these	أرد بدود م
v) Direct Candidate Support (List Activity of	or Event Identitier)			
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vi) Public Communications Referring Only	to Party (Made by PAC)		large para di kanaman di mandi di mandi kanaman di mandi and mandi di mandi di mandi di mandi di mandi di mandi	
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MR. DAVID TOUTGE : NOLINAIL

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