

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.

The National Republican Trust PAC

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:
- | | | | |
|--------------------------------------|--------------------------------------|---|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input checked="" type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> 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 Wheeler

Signature of Treasurer Scott Wheeler [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.

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

The National Republican Trust PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="16671.80"/>	<input type="text" value="16671.80"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="4108.40"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="13705.77"/>	<input type="text" value="94832.93"/>
(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="17814.17"/>	<input type="text" value="111504.73"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="13796.40"/>	<input type="text" value="107486.96"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="4017.77"/>	<input type="text" value="4017.77"/>
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="24630.80"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

The National Republican Trust PAC

Report Covering the Period: From: / / To: / /

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).....	1985.00	20757.00
(ii) Unitemized	8954.16	51473.18
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10939.16	72230.18
(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)	10939.16	72230.18
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	20.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2766.61	22582.75
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))..... ▶	13705.77	94832.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	13705.77	94832.93

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	6986.05	68284.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6986.05	68284.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	5500.00	5500.00
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	2500.00
(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	2500.00
29. Other Disbursements	1310.35	31202.23
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)) ..	13796.40	107486.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13796.40	107486.96

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)	10939.16	72230.18
34. Total Contribution Refunds (from Line 28(d))	0.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10939.16	69730.18
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6986.05	68284.73
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	20.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6986.05	68264.73

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

The Independent Expenditure entries on Schedule E reflect payments made for the \$5,500 Online Ad on 7/8/15. The communication was disseminated nationally and the cost has been allocated equally to each state (\$110 per state).

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 34
	(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)
The National Republican Trust PAC

A. Philip S Allen
Full Name (Last, First, Middle Initial)

Mailing Address 371 S Brent St

City State Zip Code
Ventura CA 93003

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
08 / 27 / 2015
Transaction ID : 50910.C227992

Amount of Each Receipt this Period
250.00

Receipt

B. Dana Anderson
Full Name (Last, First, Middle Initial)

Mailing Address 100 Fall Creek Road

City State Zip Code
Lawrence KS 66049

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

Name of Employer Occupation
Macerich Real Estate Investment Trus

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
08 / 26 / 2015
Transaction ID : 50910.C227990

Amount of Each Receipt this Period
200.00

Receipt

C. Dana Anderson
Full Name (Last, First, Middle Initial)

Mailing Address 100 Fall Creek Road

City State Zip Code
Lawrence KS 66049

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

Name of Employer Occupation
Macerich Real Estate Investment Trus

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
08 / 26 / 2015
Transaction ID : 50910.C227613

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00

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 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)
A. Anthony J Arjil

Mailing Address 880 Cumorah Court

City Placerville State CA Zip Code 95667

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

Name of Employer Retired 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
08 / 11 / 2015

Transaction ID : 50910.C227903

Amount of Each Receipt this Period
35.00

Receipt

Full Name (Last, First, Middle Initial)
B. Evelyn Catano

Mailing Address 33600 Globe Dr

City Springville State CA Zip Code 93265

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

Name of Employer State of California Occupation Chief of Rehab Therapy

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
08 / 04 / 2015

Transaction ID : 50910.C227808

Amount of Each Receipt this Period
25.00

Receipt

Full Name (Last, First, Middle Initial)
C. Evelyn Catano

Mailing Address 33600 Globe Dr

City Springville State CA Zip Code 93265

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

Name of Employer State of California Occupation Chief of Rehab Therapy

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
08 / 25 / 2015

Transaction ID : 50910.C227809

Amount of Each Receipt this Period
25.00

Receipt

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: PAGE 9 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

A. Judith Haber
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 Marina Drive
 City State Zip Code
 Catskill NY 12414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Executive
 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
 08 / 27 / 2015
Transaction ID : 50910.C227994
 Amount of Each Receipt this Period
 500.00
 Receipt

B. James Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 10323 South Gessner Rd
 City State Zip Code
 Houston TX 77071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Vet
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 07 / 2015
Transaction ID : 50910.C227843
 Amount of Each Receipt this Period
 25.00
 Receipt

C. James Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 10323 South Gessner Rd
 City State Zip Code
 Houston TX 77071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Vet
 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
 08 / 18 / 2015
Transaction ID : 50910.C227844
 Amount of Each Receipt this Period
 50.00
 Receipt

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: (check only one)	PAGE 10 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

A. Joseph D Howe
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 Siesta Way
 City Sedona State AZ Zip Code 86336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired 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
 08 / 04 / 2015
Transaction ID : 50910.C227793
 Amount of Each Receipt this Period
 25.00
 Receipt

B. Joseph D Howe
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 Siesta Way
 City Sedona State AZ Zip Code 86336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation 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
 08 / 11 / 2015
Transaction ID : 50910.C227794
 Amount of Each Receipt this Period
 50.00
 Receipt

C. Ronald D Jones
 Full Name (Last, First, Middle Initial)
 Mailing Address 11161 Peppermill Lane
 City Fishers State IN Zip Code 46037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Motion Engineering Company, In Occupation Founder
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2015
Transaction ID : 50910.C227840
 Amount of Each Receipt this Period
 25.00
 Receipt

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 11 OF 34
(check only one)

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

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)
A. Cheryl Keithly

Mailing Address 5702 W County 8 1/2 Street

City	State	Zip Code
Yuma	AZ	85364

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

Name of Employer	Occupation
Keithly Williams Seeds	Vegetable Seed Dealership

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
08 / 06 / 2015

Transaction ID : 50910.C227968

Amount of Each Receipt this Period
100.00

Receipt

Full Name (Last, First, Middle Initial)
B. Kathleen L Maselli

Mailing Address 61 South Avenue

City	State	Zip Code
Smithtown	NY	11787

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

Name of Employer	Occupation
Smithtown School	Aide

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
08 / 01 / 2015

Transaction ID : 50910.C227911

Amount of Each Receipt this Period
50.00

Receipt

Full Name (Last, First, Middle Initial)
C. Martin J Pierret

Mailing Address 9592 Snake River Road

City	State	Zip Code
Pasco	WA	99301

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

Name of Employer	Occupation
Self Employed	Farmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 03 / 2015

Transaction ID : 50910.C227777

Amount of Each Receipt this Period
25.00

Receipt

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 12 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)
A. Martin J Pierret

Mailing Address 9592 Snake River Road

City Pasco State WA Zip Code 99301

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

Name of Employer Occupation
Self Employed Farmer

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
 08 / 16 / 2015
Transaction ID : 50910.C227778

Amount of Each Receipt this Period
25.00

Receipt

Full Name (Last, First, Middle Initial)
B. Elaine K Portier

Mailing Address 15770 SW Towhee Ln

City Beaverton State OR Zip Code 97007

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
322.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2015
Transaction ID : 50910.C227779

Amount of Each Receipt this Period
25.00

Receipt

Full Name (Last, First, Middle Initial)
C. Elaine K Portier

Mailing Address 15770 SW Towhee Ln

City Beaverton State OR Zip Code 97007

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
347.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2015
Transaction ID : 50910.C227780

Amount of Each Receipt this Period
25.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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 13 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)
A. Faye Powell

Mailing Address 1101 Suwannee Drive

City Evansville State IN Zip Code 47725

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

Name of Employer BeautiControl Cosmetics Occupation Natl Ex Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **08 / 26 / 2015**

Transaction ID : 50910.C227615

Amount of Each Receipt this Period **100.00**

Receipt

Full Name (Last, First, Middle Initial)
B. Stanley Schmidt

Mailing Address PO Box 137
605 SW Church St

City Dallas State OR Zip Code 97338

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

Name of Employer Self Occupation State Farm Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt **08 / 07 / 2015**

Transaction ID : 50910.C227842

Amount of Each Receipt this Period **100.00**

Receipt

Full Name (Last, First, Middle Initial)
C. Stanley Schmidt

Mailing Address PO Box 137
605 SW Church St

City Dallas State OR Zip Code 97338

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

Name of Employer Self Occupation State Farm Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **08 / 26 / 2015**

Transaction ID : 50910.C227841

Amount of Each Receipt this Period **25.00**

Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ **225.00**

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 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)
A. Allen H Simon

Mailing Address 1383 N Criss St

City Chandler State AZ Zip Code 85226

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 08 / 22 / 2015
Transaction ID : 50910.C227978

Amount of Each Receipt this Period
 100.00

Receipt

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

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

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

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).....▶	100.00
TOTAL This Period (last page this line number only).....▶	1985.00

**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 34
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

A. Sandee K Brittain
Full Name (Last, First, Middle Initial)
Mailing Address 1435 River Park Dr Ste 510

City Sacramento	State CA	Zip Code 95815-4511
--------------------	-------------	------------------------

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

Name of Employer Brittain commercial	Occupation Property Manager
---	--------------------------------

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
08	/	25	/	2015

Transaction ID : 50910.C227993

Amount of Each Receipt this Period
450.00

Other Receipt

Note:Non-Cont Account

B. Allen H Simon
Full Name (Last, First, Middle Initial)
Mailing Address 1383 N Criss St

City Chandler	State AZ	Zip Code 85226-
------------------	-------------	--------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	19	/	2015

Transaction ID : 50910.C227979

Amount of Each Receipt this Period
100.00

Other Receipt

Note:Non-Cont Account

C. Carl E Swenlin
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 7340

City Goleta	State CA	Zip Code 93117-
----------------	-------------	--------------------

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

Name of Employer Decision Point	Occupation Internet Publisher
------------------------------------	----------------------------------

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
08	/	26	/	2015

Transaction ID : 50910.C227610

Amount of Each Receipt this Period
50.00

Other Receipt

Note:Non-Cont Account

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	600.00

**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

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 3 Dupont Circle, NW

City Washington State DC Zip Code 20036-

Purpose of Disbursement
PAC Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 07 / 2015

Transaction ID : 50910.E4526

Amount of Each Disbursement this Period

15.00

PAC BANK FEE

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address 3 Dupont Circle, NW

City Washington State DC Zip Code 20036-

Purpose of Disbursement
PAC Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 12 / 2015

Transaction ID : 50910.E4532

Amount of Each Disbursement this Period

35.00

PAC BANK FEE

Full Name (Last, First, Middle Initial)

C. Capitol Media Group, LLC

Mailing Address 344 Maple Ave West #375

City Vienna State VA Zip Code 22180-

Purpose of Disbursement
PAC Management Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 03 / 2015

Transaction ID : 50806.E4455

Amount of Each Disbursement this Period

2000.00

PAC MANAGEMENT CONSULTING

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

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

2050.00

**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

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)

A. Capitol Media Group, LLC

Mailing Address 344 Maple Ave West #375

City Vienna State VA Zip Code 22180-

Purpose of Disbursement
PAC Book/Video Purchase

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 07 / 2015

Transaction ID : 50915.E4594

Amount of Each Disbursement this Period

290.00

PAC BOOK/VIDEO PURCHASE

Full Name (Last, First, Middle Initial)

B. Capitol Media Group, LLC

Mailing Address 344 Maple Ave West #375

City Vienna State VA Zip Code 22180-

Purpose of Disbursement
PAC Management Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 07 / 2015

Transaction ID : 50807.E4509

Amount of Each Disbursement this Period

310.00

PAC MANAGEMENT CONSULTING

Full Name (Last, First, Middle Initial)

C. Capitol Media Group, LLC

Mailing Address 344 Maple Ave West #375

City Vienna State VA Zip Code 22180-

Purpose of Disbursement
PAC Management Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2015

Transaction ID : 50910.E4521

Amount of Each Disbursement this Period

200.00

PAC MANAGEMENT CONSULTING

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

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

800.00

**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

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)

A. Constant Contact

Mailing Address 1601 Trapelo Road, Suite 329

City Waltham State MA Zip Code 02451-

Purpose of Disbursement
PAC Email Service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 16 / 2015

Transaction ID : 50910.E4537

Amount of Each Disbursement this Period

295.00

PAC EMAIL SERVICE

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30320-

Purpose of Disbursement
PAC Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 11 / 2015

Transaction ID : 50910.E4533

Amount of Each Disbursement this Period

255.60

PAC TRAVEL

Full Name (Last, First, Middle Initial)

C. Koch & Hoos, LLC

Mailing Address P.O. Box 1154

City Alexandria State VA Zip Code 22313-

Purpose of Disbursement
PAC Accounting Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2015

Transaction ID : 50806.E4454

Amount of Each Disbursement this Period

1092.25

PAC ACCOUNTING CONSULTING

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

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

1642.85

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)

A. Koch & Hoos, LLC

Mailing Address P.O. Box 1154

City Alexandria State VA Zip Code 22313-

Purpose of Disbursement
PAC Accounting Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : 50910.E4522

Amount of Each Disbursement this Period

800.00

PAC ACCOUNTING CONSULTING

Full Name (Last, First, Middle Initial)

B. Maelstrom Technologies Solutions

Mailing Address 200 S. Executive Drive, Suite 101

City Brookfield State WI Zip Code 53005-

Purpose of Disbursement
PAC Credit Card Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : 50910.E4590

Amount of Each Disbursement this Period

623.87

PAC CREDIT CARD PROCESSING

Full Name (Last, First, Middle Initial)

C. Mailchimp

Mailing Address 512 Means St
Suite 404

City Atlanta State GA Zip Code 30318-

Purpose of Disbursement
PAC Email Service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 07 / 2015

Transaction ID : 50910.E4527

Amount of Each Disbursement this Period

240.00

PAC EMAIL SERVICE

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

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

1663.87

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)

A. Mailchimp

Mailing Address 512 Means St
Suite 404

City Atlanta State GA Zip Code 30318-

Purpose of Disbursement
PAC Email Service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 17 / 2015

Transaction ID : 50910.E4538

Amount of Each Disbursement this Period

230.00

PAC EMAIL SERVICE

Full Name (Last, First, Middle Initial)

B. Prime Rib

Mailing Address 2020 K St NW

City Washington State DC Zip Code 20006-

Purpose of Disbursement
PAC Food & Beverage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2015

Transaction ID : 50910.E4531

Amount of Each Disbursement this Period

123.26

PAC FOOD & BEVERAGE

Full Name (Last, First, Middle Initial)

C. United States Postal Service

Mailing Address 475 LEnfant Plaza SW

City Washington State DC Zip Code 20260-

Purpose of Disbursement
PAC Postage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2015

Transaction ID : 50910.E4539

Amount of Each Disbursement this Period

101.00

PAC POSTAGE

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

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

454.26

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)

A. United States Postal Service

Mailing Address 475 L'Enfant Plaza SW

City Washington State DC Zip Code 20260-

Purpose of Disbursement
PAC Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 21 / 2015

Transaction ID : 50910.E4540

Amount of Each Disbursement this Period

60.60

PAC POSTAGE

Full Name (Last, First, Middle Initial)

B. Virgin Mobile USA

Mailing Address 10 Independence Blvd.

City Warren State NJ Zip Code 07059-

Purpose of Disbursement
PAC Phone Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 13 / 2015

Transaction ID : 50910.E4536

Amount of Each Disbursement this Period

61.60

PAC PHONE EXPENSE

Full Name (Last, First, Middle Initial)

C. Virgin Mobile USA

Mailing Address 10 Independence Blvd.

City Warren State NJ Zip Code 07059-

Purpose of Disbursement
PAC Phone Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 27 / 2015

Transaction ID : 50910.E4541

Amount of Each Disbursement this Period

39.20

PAC PHONE EXPENSE

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

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

161.40

6772.38

**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

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)

A. Hotel Tonight

Mailing Address 901 Market Ste 310

City San Francisco State CA Zip Code 94103-

Purpose of Disbursement
NON-CONT PAC LODGING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 11 / 2015

Transaction ID : 50910.E4552

Amount of Each Disbursement this Period

144.00

Full Name (Last, First, Middle Initial)

B. Hotel Tonight

Mailing Address 901 Market Ste 310

City San Francisco State CA Zip Code 94103-

Purpose of Disbursement
NON-CONT PAC LODGING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 09 / 2015

Transaction ID : 50910.E4546

Amount of Each Disbursement this Period

114.00

Full Name (Last, First, Middle Initial)

C. Koch & Hoos, LLC

Mailing Address P.O. Box 1154

City Alexandria State VA Zip Code 22313-

Purpose of Disbursement
NON-CONT PAC ACCOUNTING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : 50910.E4523

Amount of Each Disbursement this Period

200.00

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

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

458.00

**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

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)

A. Maelstrom Technologies Solutions

Mailing Address 200 S. Executive Drive, Suite 101

City Brookfield State WI Zip Code 53005-

Purpose of Disbursement
NON-CONT PAC CREDIT CARD PROCESSING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : 50910.E4589

Amount of Each Disbursement this Period

44.60

Full Name (Last, First, Middle Initial)

B. Orbitz, LLC

Mailing Address 200 S Wacker Dr Ste 1900

City Chicago State IL Zip Code 60606-5857

Purpose of Disbursement
NON-CONT PAC TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 07 / 2015

Transaction ID : 50910.E4542

Amount of Each Disbursement this Period

124.76

Full Name (Last, First, Middle Initial)

C. Parrot Video Services

Mailing Address 33161 Camino Capistrano

City San Juan Capistran State CA Zip Code 92675-

Purpose of Disbursement
NON-CONT PAC VIDEO PRODUCTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2015

Transaction ID : 50910.E4554

Amount of Each Disbursement this Period

250.00

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

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

419.36

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 North First St

City San Jose State CA Zip Code 95131-

Purpose of Disbursement
NON-CONT PAC CREDIT CARD PROCESSING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2015

Transaction ID : 50910.E4588

Amount of Each Disbursement this Period

72.67

Full Name (Last, First, Middle Initial)

B. St. Gregory Hotel & Suites

Mailing Address 2033 M Street, NW

City Washington State DC Zip Code 20036-

Purpose of Disbursement
NON-CONT PAC FOOD & BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 10 / 2015

Transaction ID : 50910.E4547

Amount of Each Disbursement this Period

17.40

Full Name (Last, First, Middle Initial)

C. St. Gregory Hotel & Suites

Mailing Address 2033 M Street, NW

City Washington State DC Zip Code 20036-

Purpose of Disbursement
NON-CONT PAC LODGING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 11 / 2015

Transaction ID : 50910.E4549

Amount of Each Disbursement this Period

171.75

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

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

261.82

**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

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NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1455 Market Street
Ste 400

City San Francisco State CA Zip Code 94103-

Purpose of Disbursement
NON-CONT PAC TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 12 / 2015

Transaction ID : 50910.E4553

Amount of Each Disbursement this Period

12.12

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1455 Market Street
Ste 400

City San Francisco State CA Zip Code 94103-

Purpose of Disbursement
NON-CONT PAC TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 11 / 2015

Transaction ID : 50910.E4551

Amount of Each Disbursement this Period

12.17

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1455 Market Street
Ste 400

City San Francisco State CA Zip Code 94103-

Purpose of Disbursement
NON-CONT PAC TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 08 / 2015

Transaction ID : 50910.E4545

Amount of Each Disbursement this Period

36.81

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

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

61.10

**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)
The National Republican Trust PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1455 Market Street
Ste 400

City San Francisco State CA Zip Code 94103-

Purpose of Disbursement
NON-CONT PAC TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 10 / 2015

Transaction ID : 50910.E4548

Amount of Each Disbursement this Period

9.08

Full Name (Last, First, Middle Initial)

B. Virgin America Airline

Mailing Address PO Box 4271

City Burlingame State CA Zip Code 94011-4271

Purpose of Disbursement
NON-CONT PAC TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 07 / 2015

Transaction ID : 50910.E4543

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

34.08

1234.36

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 27 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Koch & Hoos, LLC	Nature of Debt (Purpose): PAC Accounting Consulting
Mailing Address P.O. Box 1154	
City State Zip Code Alexandria VA 22313-	

Outstanding Balance Beginning This Period <input type="text" value="6513.15"/>	Transaction ID : LS50914.E4591	
Amount Incurred This Period <input type="text" value="2839.45"/>	Payment This Period <input type="text" value="2092.25"/>	Outstanding Balance at Close of This Period <input type="text" value="7260.35"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capitol Media Group, LLC	Nature of Debt (Purpose): O P00003392 7/8 Online Ad
Mailing Address 344 Maple Ave West #375	
City State Zip Code Vienna VA 22180-	

Outstanding Balance Beginning This Period <input type="text" value="5500.00"/>	Transaction ID : LS50818.E4512	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="5500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capitol Media Group, LLC	Nature of Debt (Purpose): PAC Book/Video Purchase
Mailing Address 344 Maple Ave West #375	
City State Zip Code Vienna VA 22180-	

Outstanding Balance Beginning This Period <input type="text" value="290.00"/>	Transaction ID : LS50915.E4594	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="290.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="7260.35"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 28 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Spectrum Communications	Nature of Debt (Purpose): PAC Telephone Expense
Mailing Address 125 N Executive Dr, Ste. 300	
City State Zip Code Brookfield WI 53005-	

Outstanding Balance Beginning This Period <input type="text" value="750.15"/>	Transaction ID : LS31122.E3455	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="750.15"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CRC Public Relations	Nature of Debt (Purpose): PAC Press Releases
Mailing Address 2760 Eisenhower Ave, 4th Floor	
City State Zip Code Alexandria VA 22314-	

Outstanding Balance Beginning This Period <input type="text" value="1461.50"/>	Transaction ID : LS00518.E1539	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1461.50"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PR Newswire	Nature of Debt (Purpose): PAC Press Releases
Mailing Address G.P.O. Box 5897	
City State Zip Code New York NY 10087-5897	

Outstanding Balance Beginning This Period <input type="text" value="1722.50"/>	Transaction ID : LS11114.E2385	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1722.50"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="3934.15"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 29 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Diener Consultants, Inc.	Nature of Debt (Purpose): PAC Email Communication- In Dispute
Mailing Address 1002 Lititz Pike # 237	
City State Zip Code Lititz PA 17543-9328	

Outstanding Balance Beginning This Period 8000.00	Transaction ID : LS10419.E2174	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor DB Capitol Strategies PLLC	Nature of Debt (Purpose): PAC Legal Fees
Mailing Address 717 King St, Ste 300	
City State Zip Code Alexandria VA 22314-	

Outstanding Balance Beginning This Period 2000.00	Transaction ID : LS31016.E3418	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Political Insider, LLC	Nature of Debt (Purpose): IE Email Communication
Mailing Address P.O. Box 25574	
City State Zip Code Alexandria VA 22313-5574	

Outstanding Balance Beginning This Period 520.00	Transaction ID : LS20523.E2645	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 520.00

1) SUBTOTALS This Period This Page (optional)..... ▶	10520.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 30 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
The National Republican Trust PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Diener Consultants, Inc.	Nature of Debt (Purpose): IE Email Communication
Mailing Address 10940 S Parker Rd, Ste. 763	
City State Zip Code Parker CO 80134-7440	

Outstanding Balance Beginning This Period 719.50	Transaction ID : LS20618.E2681	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 719.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LexisNexis	Nature of Debt (Purpose): PAC Subscription
Mailing Address P.O. Box 7247-7090	
City State Zip Code Philadelphia PA 19170-	

Outstanding Balance Beginning This Period 1356.80	Transaction ID : LS30807.E3300	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1356.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Active Engagement	Nature of Debt (Purpose): PAC Email Communication
Mailing Address 44084 Riverside Pkwy, Suite 350	
City State Zip Code Leesburg VA 20176-	

Outstanding Balance Beginning This Period 840.00	Transaction ID : LS50506.E4380	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 840.00

1) SUBTOTALS This Period This Page (optional)..... ▶	2916.30
2) TOTALS This Period (last page this line number only)..... ▶	24630.80
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	24630.80

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) The National Republican Trust PAC	FEC IDENTIFICATION NUMBER ▼ C C00455378
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Capitol Media Group, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 07 / 08 / 2015
Mailing Address 344 Maple Ave West #375	Amount 1000.00
City Vienna State VA Zip Code 22180-	Transaction ID : 50818.E4514 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 13 / 2015
Purpose of Expenditure <input type="radio"/> 7/8 Online Ad	Category/Type []
Name of Federal Candidate HILLARY RODHAM CLINTON	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 5500.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Capitol Media Group, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 07 / 08 / 2015
Mailing Address 344 Maple Ave West #375	Amount 200.00
City Vienna State VA Zip Code 22180-	Transaction ID : 50818.E4512 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 13 / 2015
Purpose of Expenditure <input type="radio"/> 7/8 Online Ad	Category/Type []
Name of Federal Candidate HILLARY RODHAM CLINTON	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 5500.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1200.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	[]
(c) TOTAL Independent Expenditures..... ▶	[]

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Scott Wheeler

[Electronically Filed]

Date M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2015

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) The National Republican Trust PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00455378 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Capitol Media Group, LLC	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 07 / 08 / 2015 </div>
Mailing Address 344 Maple Ave West #375	Amount <div style="border: 1px solid black; padding: 2px;"> 800.00 </div>
City State Zip Code Vienna VA 22180-	Transaction ID : 50818.E4513 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 08 / 08 / 2015 </div>
Purpose of Expenditure O 7/8 Online Ad	Category/Type
Name of Federal Candidate HILLARY RODHAM CLINTON	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px;"> 5500.00 </div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Capitol Media Group, LLC	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 07 / 08 / 2015 </div>
Mailing Address 344 Maple Ave West #375	Amount <div style="border: 1px solid black; padding: 2px;"> 300.00 </div>
City State Zip Code Vienna VA 22180-	Transaction ID : 50910.E4517 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 08 / 18 / 2015 </div>
Purpose of Expenditure O 7/8 Online Ad	Category/Type
Name of Federal Candidate HILLARY RODHAM CLINTON	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px;"> 5500.00 </div> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> 1100.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> _____ </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Scott Wheeler

 Signature

[Electronically Filed] Date

MM / DD / YYYY
 10 / 26 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) The National Republican Trust PAC	FEC IDENTIFICATION NUMBER ▼ C C00455378
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Capitol Media Group, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 07 / 08 / 2015
Mailing Address 344 Maple Ave West #375	Amount 1300.00
City Vienna State VA Zip Code 22180-	Transaction ID : 50910.E4520 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 26 / 2015
Purpose of Expenditure <input type="radio"/> 7/8 Online Ad	Category/Type []
Name of Federal Candidate HILLARY RODHAM CLINTON	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 5500.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Capitol Media Group, LLC	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 07 / 08 / 2015
Mailing Address 344 Maple Ave West #375	Amount 800.00
City Vienna State VA Zip Code 22180-	Transaction ID : 50910.E4518 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 08 / 18 / 2015
Purpose of Expenditure <input type="radio"/> 7/8 Online Ad	Category/Type []
Name of Federal Candidate HILLARY RODHAM CLINTON	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 5500.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2100.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	[]
(c) TOTAL Independent Expenditures..... ▶	[]

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Scott Wheeler [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2015

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) The National Republican Trust PAC	FEC IDENTIFICATION NUMBER ▼ C C00455378
---	--

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee Capitol Media Group, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 08 / 2015
Mailing Address 344 Maple Ave West #375	Amount 1100.00
City State Zip Code Vienna VA 22180-	Transaction ID : 50910.E4519 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 08 / 26 / 2015
Purpose of Expenditure O 7/8 Online Ad	Category/Type
Name of Federal Candidate HILLARY RODHAM CLINTON	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 5500.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure	Category/Type
Name of Federal Candidate	<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1100.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	5500.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Scott Wheeler
Signature [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
10 / 26 / 2015