Image# 11930425404

REPORT OF RECEIPTS AND DISBURSEMENTS FOR A COMMITTEE OR ORGANIZATION 12/:282

SUPPORTING A NOMINATING CONVENTION	ON (Summary Page)	
1. (a) Name of Committee (in full)	2. FEC Identifica	tion Number
COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLICAN NATIONAL CONVENTION	C00485110	
(b) Address (Number and Street)	3. Type of Comm	nittee/Organization
310 FIRST STREET SE	Conventio	n Committee
	Host Com	mittee
(c) City, State, and ZIP Code	Other	
WASHINGTON DC 20003		(specify)
4. TYPE OF REPORT (check appropriate box(es))		
(a) POST-CONVENTION REPORT		
QUARTERLY REPORT (check one) April 15 July 15 Octob	er 15 X January 31	
☐ FINAL REPORT		
(b) Is this an Amendment ? X YES NO		
5. Covering period FROM: 10/01/2010 THROUGH: 12/31/2010		
	Column A	Column B
SECTION A - CASH BALANCE SUMMARY	This period	Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2010		0.00
(h) Cook on Hand at Decimains of Depositing Deviced	363146.70	
(b) Cash on Hand at Beginning of Reporting Period		
	267.20	1000275.20
(c) Total Receipts (From Line 20)		
	202412.00	1000075 00
(d) Subtotal (Add Lines 6(b) and 6(c) for Column A and 6(a) and 6(c) for Column B)	363413.90	1000275.20
7. Total Disbursements (From Line 25)	302805.25	939666.55
,		
Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	60608.65	60608.65
Debts and Obligations Owed TO the Committee		
	0.00	
(Itemize all on Schedule C or Schedule D)		-
10. Debts and Obligations Owed BY the Committee	1000000.00	
(Itemize all on Schedule C or Schedule D)		
SECTION B - SUMMARY OF EXPENDITURES SUBJECT TO LIMITATIONS		
	000005.05	000000 55
11. Convention Expenditures (from line 21(c))	302805.25	939666.55
12. Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures (From Line 17(c))	267.20	275.20
(a) Expenditures Subject to Limitation (Subtract Line 12 from Line 11)	302538.05	939391.35
(a) Experiorities Subject to Elimitation (Subtract Line 12 from Line 11)		
	0.00	0.00
(b) Expenditures from Prior Years Subject to Limitation		
		939391.35
(c) Total Expenditures Subject to Limitation (Add Lines 12(a) and 12(b))		3555555

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

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct, and complete.

Louis Pope

02/28/2011

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS (PAGE 2 of FEC Form 4)

(PAGE 2 of FEC Form 4)		
Name of committee (in full)	Report Covering the Perio	od
COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLICAN NATIONAL CONVENTION	FROM: 10/01/2010	TO: 12/31/2010
RECEIPTS	Column A This period	Column B Calendar Year-to-Date
13. Federal Funds (Itemize all on Schedule A)	0.00	0.00
14. Contributions to Defray Convention Expenses:		
(a) Itemized (Use Schedule A)	0.00	
(b) Unitemized	0.00	
(c) Subtotal of Contributions to Defray Convention Expenses (Add Lines (14(a) and 14(b))	0.00	0.00
15. Transfers from Affiliated Committees	0.00	0.00
16. Loans and Loan Repayments Received (Add Lines 16(a) and 14(b))		
(a) Loans Received	0.00	
(b) Loan Repayments Received	0.00	
(c) Subtotal of Loans and Loan Repayments Received (add Line 14a and 14b)	0.00	1000000.00
17. Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures:		
(a) Itemized (Use Schedule A)	0.00	
(b) Unitemized	267.20	
(c) Subtotal of Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures (Add Lines (17(a) and 17(b))	267.20	275.20
18. Other Refunds, Rebates, Returns of Deposits:		
(a) Itemized Other Refunds, Rebates, Returns of Deposits	0.00	
(b) Unitemized Other Refunds, Rebates, Returns of Deposits	0.00	
(c) Subtotal of Refunds, Rebates, Returns of Deposits		
(Add Lines 18(a) and 18(b))	0.00	0.00
19. Other Income		
(a) Itemized (Use Schedule A)	0.00	
(b) Unitemized	0.00	
(c) Subtotal of Other Income (Add Lines 13, 14(c), 15, 16(c), 17(c), 18 (c) and 19(c))	0.00	0.00
20. TOTAL RECEIPTS (Add Lines 13, 14(c), 15(c), 16(c), 17(c), 18(c) and 19(c))	267.20	1000275.20
DISBURSEMENTS		
21. Convention Expenditures:		
(a) Itemized (Use Schedule B)	301981.85	7
(b) Unitemized	823.40	
(c) Subtotal of Convention Expenditures (Add Lines 21(a) and 21(b))	302805.25	939666.55
22. Transfers to Affiliated Committees	0.00	0.00
20 Lawrend Law Branner Medi		
23. Loans and Loan Repayments Made (a) Loans Made	0.00	
(b) Loan Repayments Made (c) Subtotal of Loans and Loan Repayments Made (Add Lines 23(a) and 23(b))	0.00	
(c) Subtotal of Loans and Loan Repayments Made (Add Lines 23(a) and 23(b))	0.00	0.00
24. Other Disbursements:		
(a) Itemized (Use Schedule B)	0.00	
(b) Unitemized	0.00	
(c) Subtotal of Other Disbursments (Add Lines 24(a) and 24(b))	0.00	0.00
	302805.25	939666.55
25. TOTAL DISBURSEMENTS (Add Lines 21(c), 22, 23(c) and 24(c))		

В.

C.

ge# 11930425406					
SCHEDULE B (FEC Form 4) TEMIZED DISBURSEMENTS	Use separate scho for each category Detailed Summary	of the	FOR LINE NUMBER: PAGE 3 / 28 (check only one)		
Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad			on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEMENTS FOR THE 2					
Full Name (Last, First, Middle Initial) JOE CLUSTER			Transaction ID: SB21A.14 Date of Disbursement		
Mailing Address PO BOX 1809			10 10 29 7 2010		
City State TAMPA FL	Zip Code 33601		Amount of Each Disbursement this Period		
Purpose of Disbursement PAYROLL			5033.03		
Candidate Name		Category/ Type	1		
State: District: Full Name (Last, First, Middle Initial) JOE CLUSTER			Transaction ID: SB21A.35 Date of Disbursement		
Mailing Address PO BOX 1809			12 01 7 2010		
City State TAMPA FL	Zip Code 33601		Amount of Each Disbursement this Period		
Purpose of Disbursement PAYROLL			5033.03		
Candidate Name		Category/ Type			
Office Sought: House Senate President Disbursement For Primar Other (
State: District:					
Full Name (Last, First, Middle Initial) JOE CLUSTER			Transaction ID: SB21A.53 Date of Disbursement		
Mailing Address PO BOX 1809			12 7 2 0 1 0		
City State TAMPA FL	Zip Code 33601		Amount of Each Disbursement this Period		
Purpose of Disbursement PAYROLL			5033.03		
Candidate Name		Category/ Type			
Office Sought: House Disbursement Formate President Other (
State: District:					
SUBTOTAL of Disbursements This Page (optional)			15099.09		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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age# 11930425407		
SCHEDULE B (FEC Form 4) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 4/28 (check only one)
Any Information copied from such Reports and Statements or for commercial purposes, other than using the name an		
NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEMENTS FOR TH	E 2012 REPUBLICAN NATION	ONAL CONVENTION
Full Name (Last, First, Middle Initial) BELINDA COOK		Transaction ID: SB21A.12 Date of Disbursement
Mailing Address PO BOX 1809		M M / 29 / Y 2010
City Stat TAMPA FL	e Zip Code 33601	Amount of Each Disbursement this Period
Purpose of Disbursement PAYROLL		9782.28
Candidate Name	Catego Type	
President Ot	nt For: mary General her (specify) ▼	
State: District: Full Name (Last, First, Middle Initial)		Transaction ID: SB21A.33
BELINDA COOK Mailing Address		Date of Disbursement 1 2
PO BOX 1809		
City Stat TAMPA FL	e Zip Code 33601	Amount of Each Disbursement this Period
Purpose of Disbursement PAYROLL		9782.28
Candidate Name	Catego Type	
President Ot	nt For: mary General ther (specify) ▼	
State: District: Full Name (Last, First, Middle Initial)		Transaction ID: SB21A.51
BELINDA COOK		Date of Disbursement 12 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Mailing Address PO BOX 1809		
City Stat TAMPA FL	e Zip Code 33601	Amount of Each Disbursement this Period
Purpose of Disbursement PAYROLL		9782.28
Candidate Name	Catego Type	· ·
President Ot	nt For: mary General her (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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	CHEDULE B (FEC Form 4) EMIZED DISBURSEMENTS	Use separate schedule for each category of the Detailed Summary Page	e(s) ne ge (cl	DR LINE NUMBER: PAGE 5 / 28 heck only one)
Ar	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and	may not be sold or used by a address of any political com	any person f	for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEMENTS FOR THE	2012 REPUBLICAN NA	ATIONAL	CONVENTION
Α.	Full Name (Last, First, Middle Initial) LEE COOK			Transaction ID: SB21A.1 Date of Disbursement
	Mailing Address PO BOX 1809			10
	City State TAMPA FL	Zip Code 33601		Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL		•	5155.81
	Candidate Name		ategory/ Type	
	Office Sought: House Disbursement Senate Prim President Othe			
_	State: District:			
В.	Full Name (Last, First, Middle Initial) LEE COOK			Transaction ID: SB21A.13 Date of Disbursement
	Mailing Address PO BOX 1809			10
	City State TAMPA FL	Zip Code 33601		Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL		•	5155.81
	Candidate Name		ategory/ Type	
	Office Sought: House Disbursement Senate Prim President Othe State: District:			
С.	Full Name (Last, First, Middle Initial) LEE COOK			Transaction ID: SB21A.23 Date of Disbursement
	Mailing Address PO BOX 1809			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y$
	City State TAMPA FL	Zip Code 33601		Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL			607.50
	Candidate Name		ategory/ Type	
	Office Sought: House Disbursement Senate Prim	For:	•	
_	State: District:	•		
,	SUBTOTAL of Disbursements This Page (optional)		▶	10919.12

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age# 11930425409							
SCHEDULE B (FEC Form 4) ITEMIZED DISBURSEMENTS	Use separate sci for each category Detailed Summa	of the	FOR LINE NUMBER: (check only one)				
Any Information copied from such Reports and Statement						utions	4a
or for commercial purposes, other than using the name an NAME OF COMMITTEE (In Full)	d address of any politica	li committee	O SOIICIL CON	tributions ir	om such comm	illee	
COMMITTEE ON ARRANGEMENTS FOR TH	IE 2012 REPUBLICA	NOITAN NA	IAL CONV	ENTION			
Full Name (Last, First, Middle Initial) LEE COOK					SB21A.34		
			Date	of Disburs		0 1 0 °	1
Mailing Address PO BOX 1809			1 2		01 20	3 1 0	
City Stat TAMPA FL	e Zip Code 33601		Amo	ount of Each	Disbursement	this Per	riod
Purpose of Disbursement	33001		7 C		51	55.81	
PAYROLL Candidate Name		Catanani	_				
Candidate Name		Category Type					
Office Sought: House Disburseme	nt For: mary General						
	her (specify)						
State: District:							
Full Name (Last, First, Middle Initial) LEE COOK					SB21A.4		
				of Disburs		0 1 0 Y	1
Mailing Address PO BOX 1809			10		74 21	310	
City Stat TAMPA FL	e Zip Code 33601		Amo	unt of Each	Disbursement	this Per	riod
Purpose of Disbursement			T L		27	44.14	
PAYROLL Candidate Name		Category					
		Type					
Office Sought: House Disbursement Senate Pr	nt For: mary General						
President Ot	her (specify) ▼						
State: District: Full Name (Last, First, Middle Initial)					00014.50		
LEE COOK				saction ID: of Disburs	SB21A.52 ement		
Mailing Address			1 ₂	M / D 3	3 0 Y Y Y	010	
PO BOX 1809							
City Stat TAMPA FL	e Zip Code 33601		Amo	ount of Each	Disbursement	this Per	riod
Purpose of Disbursement PAYROLL			7 L		51	55.81	
Candidate Name		Category Type	_				
	nt For: mary General her (specify)						
State: District:							

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SCHEDULE B (FEC Form 4) ITEMIZED DISBURSEMENTS	Use separate sol for each category Detailed Summa	of the	(C	FOR LINE NUMBER: PAGE 7 (check only one)						
Any Information copied from such Reports and Statements m	nay not be sold or use	d by any ner		21a	22	of so	23a	23b		24a
or for commercial purposes, other than using the name and a										
NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEMENTS FOR THE	2012 REPUBLICA	IOITAN NA	NAL	CONVE	NTIO	N				
Full Name (Last, First, Middle Initial)				Transa	ction	ID:	SB2	1A.59		
LEE COOK				Date o						
Mailing Address PO BOX 1809				10	M /	0	1 /	y ž o	ť 0	
City State	Zip Code			Amou	nt of Ea	ach	Disbu	rsement t	his Pe	eriod
TAMPA FL Purpose of Disbursement	33601	1						-51	55.81	
VOID CHECK					-	-	-			
Candidate Name		Category Type	/							
Office Sought: House Disbursement F Senate Prima President Other										
State: District:										
Full Name (Last, First, Middle Initial) GRACE CUSHING Mailing Address				Transa Date o		urse	_		1 0	(
PO BOX 1809				1 4		_				_
City State TAMPA FL	Zip Code 33601			Amou	nt of Ea	ach	Disbu	rsement t		-
Purpose of Disbursement PAYROLL					• •		•	44	52.65)
Candidate Name		Category Type	·/							
Office Sought: House Disbursement F Senate President Other										
State: District:	(opeo) V									
Full Name (Last, First, Middle Initial) GRACE CUSHING					f Disb	urse	ment	1A.36		
Mailing Address PO BOX 1809				12	И /	^D 0	D /	y žo	ť 0 `	
City State TAMPA FL	Zip Code 33601			Amou	nt of Ea	ach	Disbu	rsement t		-
Purpose of Disbursement PAYROLL				L.		_	-	44	52.65)
Candidate Name		Category Type	/							
Office Sought: House Disbursement F Senate Prima President Other		•								
State: District:	、・									

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ommercial purposes, other than usir ME OF COMMITTEE (In Full)	and Statements may		y r ago	X 21a 22 23a 23b 24a
, ,	ig the hame and add	y not be sold or use dress of any politica	d by any per	son for the purpose of soliciting contributions to solicit contributions from such committee
	NTS FOR THE 20	012 REPUBLICA	NOITAN N	IAL CONVENTION
Name (Last, First, Middle Initial) RACE CUSHING				Transaction ID: SB21A.54 Date of Disbursement
iling Address DBOX 1809				12 M / 30 / Y 2010 Y
/ MPA	State FL	2ip Code 33601		Amount of Each Disbursement this Period
pose of Disbursement AYROLL				4452.65
ndidate Name			Category Type	
ice Sought: House Senate President	Primary	General		
te: District:				
Name (Last, First, Middle Initial) MELA KESNER				Transaction ID: SB21A.17 Date of Disbursement
ling Address BOX 1809				10 7 29 7 2010
/ MPA	State FL	Zip Code 33601		Amount of Each Disbursement this Period
pose of Disbursement AYROLL				2118.85
ndidate Name			Category Type	
ice Sought: House Senate President	Primary	General		
te: District:				
MELA KESNER				Transaction ID: SB21A.2 Date of Disbursement
lling Address DBOX 1809				M M / D D / Y 2 O 1 O Y
/ MPA	State FL	Zip Code 33601		Amount of Each Disbursement this Period
pose of Disbursement AYROLL				1264.15
ndidate Name			Category Type	
ice Sought: House Senate President	Primary	General		
te: District:		•		
	iling Address DBOX 1809 MPA pose of Disbursement AYROLL Indidate Name ice Sought: House Senate President te: District: I Name (Last, First, Middle Initial) MELA KESNER Iling Address DBOX 1809 MPA pose of Disbursement AYROLL Indidate Name ice Sought: House Senate President te: District: I Name (Last, First, Middle Initial) MELA KESNER Iling Address DBOX 1809 MPA pose of Disbursement AYROLL Indidate Name ice Sought: House Senate President AYROLL Indidate Name ice Sought: House Senate President AYROLL Indidate Name ice Sought: House Senate President District: District:	Iling Address D BOX 1809 / State MPA FL pose of Disbursement AYROLL Indidate Name Ice Sought: House Senate Primary President Ite: District: I Name (Last, First, Middle Initial) MELA KESNER Illing Address D BOX 1809 // State AYROLL Indidate Name Ice Sought: House Disbursement AYROLL Indidate Name Ice Sought: House Primary Disbursement AYROLL Indidate Name Ice Sought: House Disbursement Ite: District: I Name (Last, First, Middle Initial) MELA KESNER Illing Address D BOX 1809 // State Primary D Other (state) I Name (Last, First, Middle Initial) MELA KESNER Illing Address D BOX 1809 // State FL pose of Disbursement AYROLL Indidate Name Ice Sought: House Disbursement Fo Senate Primary D Other (state) I Name (Last, First, Middle Initial) MELA KESNER Illing Address D BOX 1809 // State FL pose of Disbursement AYROLL Indidate Name Ice Sought: House Disbursement Fo Primary D Other (state) I President Disbursement Fo Disb	Iling Address DBOX 1809 MPA FL 33601 Pose of Disbursement AYROLL Indidate Name Ice Sought:	Disbursement AYROLL MPA State Zip Code MPA FL 33601 Category, Type Category, Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

В.

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SCHEDULE B (FEC Form 4) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	X 21a 22 23a 23b 24a
Any Information copied from such Reports and Statements m or for commercial purposes, other than using the name and a		
NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEMENTS FOR THE 2	2012 REPUBLICAN NATI	ONAL CONVENTION
Full Name (Last, First, Middle Initial) PAMELA KESNER		Transaction ID: SB21A.38 Date of Disbursement
Mailing Address PO BOX 1809		M2 M / D0 D / Y 2 0 1 0 Y
City State TAMPA FL	Zip Code 33601	Amount of Each Disbursement this Period
Purpose of Disbursement PAYROLL		2118.85
Candidate Name	Categ Typ	· · · · · · · · · · · · · · · · · · ·
State: District: Full Name (Last, First, Middle Initial)		
PAMELA KESNER		Transaction ID: SB21A.56 Date of Disbursement 1 2 0 1 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Mailing Address PO BOX 1809		12 30 2010
City State TAMPA FL	Zip Code 33601	Amount of Each Disbursement this Period
Purpose of Disbursement PAYROLL	Ť	2118.85
Candidate Name	Categ Typ	
Office Sought: House Disbursement F Senate Prima President Other		
State: District:		
Full Name (Last, First, Middle Initial) ERIK ROHRMANN		Transaction ID: SB21A.16 Date of Disbursement
Mailing Address PO BOX 1809		M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State TAMPA FL	Zip Code 33601	Amount of Each Disbursement this Period
Purpose of Disbursement PAYROLL		4306.73
Candidate Name	Categ Typ	· · · · · · · · · · · · · · · · · · ·
Office Sought: House Disbursement F Senate President Other		
State: District:		
SUBTOTAL of Disbursements This Page (ontional)		8544.43

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

ımaç	ge# 11930425413				
	CHEDULE B (FEC Form	•	Use separate scho for each category Detailed Summary	of the	FOR LINE NUMBER: PAGE 10 / 28 (check only one)
A oı	ny Information copied from such Reporter for commercial purposes, other than us	s and Statements maging the name and add	y not be sold or used dress of any political	by any pers	son for the purpose of soliciting contributions to solicit contributions from such committee
	NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEME	ENTS FOR THE 20	012 REPUBLICAN	NOITAN N	IAL CONVENTION
A.	Full Name (Last, First, Middle Initial) ERIK ROHRMANN				Transaction ID: SB21A.37 Date of Disbursement
	Mailing Address PO BOX 1809				12 01 2010
	City TAMPA	State FL	Zip Code 33601		Amount of Each Disbursement this Perio
	Purpose of Disbursement PAYROLL				4306.73
	Candidate Name			Category/ Type	
	Office Sought: House Senate President	Disbursement Fo Primary Other (:			
	State: District:				
В.	Full Name (Last, First, Middle Initial) ERIK ROHRMANN				Transaction ID: SB21A.55 Date of Disbursement
	Mailing Address PO BOX 1809				12 D 3 D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City TAMPA	State FL	Zip Code 33601		Amount of Each Disbursement this Perio
	Purpose of Disbursement PAYROLL				4306.72
	Candidate Name			Category/ Type	
	Office Sought: House Senate President	Disbursement Fo Primary Other (s			
	State: District:				
C.	Full Name (Last, First, Middle Initial) AUTOMATIC DATA PROCESSI	NG			Transaction ID: SB21A.19 Date of Disbursement
	Mailing Address PO BOX 9001006				M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City LOUISVILLE	State KY	Zip Code 40290		Amount of Each Disbursement this Perio
	Purpose of Disbursement PAYROLL TAXES				15099.26
	Candidate Name			Category/ Type	
	Office Sought: House Senate President	Disbursement Fo Primary Other (:			
_	State: District:				
	SUBTOTAL of Disbursements This Pac	ne (optional)			23712.71

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

В.

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age# 11930425414				
SCHEDULE B (FEC Form 4 ITEMIZED DISBURSEMENT	·	Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 11 / 28 (check only one)
Any Information copied from such Reports a or for commercial purposes, other than using				on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEMEN	<u> </u>			
Full Name (Last, First, Middle Initial) AUTOMATIC DATA PROCESSIN	G			Transaction ID: SB21A.32 Date of Disbursement
Mailing Address PO BOX 9001006				1 1 1
City LOUISVILLE	State KY	Zip Code 40290		Amount of Each Disbursement this Period
Purpose of Disbursement PAYROLL TAXES				15099.26
Candidate Name			Category/ Type	
Office Sought: House Senate President	Disbursement For Primary Other (s			
State: District: Full Name (Last, First, Middle Initial)				Transaction ID: SB21A.57
AUTOMATIC DATA PROCESSIN	G			Date of Disbursement
Mailing Address PO BOX 9001006				
City LOUISVILLE	State KY	Zip Code 40290		Amount of Each Disbursement this Period
Purpose of Disbursement PAYROLL TAXES				15099.27
Candidate Name			Category/ Type	
Office Sought: Senate President State: District:	Disbursement For Primary Other (s			
Full Name (Last, First, Middle Initial) BB CONSULTING				Transaction ID: SB21A.28 Date of Disbursement
Mailing Address 8534 DUFFER'S DELL				111 D 24 Y 2010Y
City DENTON	State MD	Zip Code 21629		Amount of Each Disbursement this Period
Purpose of Disbursement HOTEL MANAGEMENT CONSULTIN	IG			7000.00
Candidate Name			Category/ Type	
Office Sought: House Senate President	Disbursement For Primary Other (s			
State: District:				

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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	SCHEDULE B (FEC Form TEMIZED DISBURSEMEN	•	Use separate sch for each category Detailed Summar	of the '	FOR LINE NUMBER: (check only one)	PAGE 12 / 28
	Any Information copied from such Reports or for commercial purposes, other than using				on for the purpose of solici	ting contributions
	NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEMEI					
Α.	Full Name (Last, First, Middle Initial) BB CONSULTING				Transaction ID: S	nt
	Mailing Address 8534 DUFFER'S DELL				1 2 M / 2 6	2010
	City DENTON	State MD	Zip Code 21629		Amount of Each Dis	bursement this Period
	Purpose of Disbursement HOTEL MANAGEMENT CONSULTI Candidate Name	NG		Category/		7000.00
	Office Sought: House Senate President	Disbursement Fo Primary Other (s		Туре		
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В.	Full Name (Last, First, Middle Initial) BB CONSULTING				Transaction ID: Since Date of Disburseme	
	Mailing Address 8534 DUFFER'S DELL				10 18	2010
	City DENTON	State MD	Zip Code 21629		Amount of Each Dis	bursement this Period
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C.	BB&T				Date of Disburseme	nt
	Mailing Address 1640 BELLE VIEW BLVD				111 / 01	2010
	City ALEXANDRIA	State VA	Zip Code 22307		Amount of Each Dis	bursement this Period
	Purpose of Disbursement LOAN INTEREST PAYMENT					1927.09
	Candidate Name			Category/ Type		
	Office Sought: House Senate President	Disbursement Fo Primary Other (s				
_	State: District:					
	SUBTOTAL of Disbursements This Page	(optional)			•	13927.09

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	NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEMEN	NTS FOR THE 20	012 REPUBLICA	N NATION	AL CONVENTION	
Α.	Full Name (Last, First, Middle Initial) BB&T				Transaction ID: S Date of Disburseme	ent
	Mailing Address 1640 BELLE VIEW BLVD				111 / 30	y 2010 ^Y
	City ALEXANDRIA	State VA	Zip Code 22307		Amount of Each Dis	sbursement this Period
	Purpose of Disbursement LOAN INTEREST PAYMENT Candidate Name			Cotonomi]	1991.32
	Office Sought: House Senate	Disbursement Fo	General	Category/ Type		
	State: President District:	Other (s	specify) $lacktriangleright$			
В.	Full Name (Last, First, Middle Initial) BB&T				Transaction ID: S Date of Disbursement 1 2 3 0	ent
	Mailing Address 1640 BELLE VIEW BLVD				12 30	Y 2010 Y
	City ALEXANDRIA	State VA	Zip Code 22307		Amount of Each Dis	sbursement this Period
	Purpose of Disbursement LOAN INTEREST PAYMENT				1	1927.08
	Candidate Name			Category/ Type		
	Office Sought: House Senate President	Disbursement For Primary Other (s				
_	State: District: Full Name (Last, First, Middle Initial)				Transaction ID: S	SB21ACCP 1
C.	BB&T BUSINESS VISA CARD				Date of Disburseme	ent
	Mailing Address PO BOX 24747				111 / 15	y 2010 ^Y
	City TAMPA	State FL	Zip Code 33623		Amount of Each Dis	sbursement this Period
	Purpose of Disbursement CREDIT CARD PAYMENT				1	7774.79
	Candidate Name			Category/ Type		
	Office Sought: House Senate President	Disbursement For Primary Other (s				
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SCHEDULE B (FEC Form 4)

FOR LINE NUMBER: PAGE 14/28 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page χ 21a 22 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) COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLICAN NATIONAL CONVENTION Full Name (Last, First, Middle Initial) Transaction ID: SB21CCD.51 **AIRTRAN** Date of Disbursement 15 2010 Mailing Address 9955 BLVD State Zip Code City Amount of Each Disbursement this Period **ORLANDO** 32827 FL 724.40 Purpose of Disbursement **TRAVEL** Candidate Name Category/ [MEMO ITEM] Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB21CCD.34 **BRIO** Date of Disbursement 15 2010 Mailing Address 2223 N WEST SHORE BLVD City State Zip Code Amount of Each Disbursement this Period **TAMPA** 33607 FL 243.25 Purpose of Disbursement FOOD/BEVERAGES Candidate Name Category/ [MEMO ITEM] Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB21CCD.53 **DOLLAR RENT-A-CAR** Date of Disbursement 2010 Mailing Address PO BOX 33167 City State Zip Code Amount of Each Disbursement this Period TÚLSA OK 74153 1573.76 Purpose of Disbursement **TRAVEL** Candidate Name Category/ [MEMO ITEM] Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District:

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Α.	Full Name (Last, EMBASSY SU	First, Middle Initial) ITES					ate of Disk	oursement		
	Mailing Address 7930 JONES I	BRANCH DR STE	1100			L	11	15	20	10
	City MCLEAN		State VA	Zip Code 22102		A	mount of E	ach Disb	ursement th	is Period
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	Candidate Name				Category Type	/ [N	IEMO ITI	EM]		
	Office Sought:	House Senate President	Disbursement Fo Primary Other (:							
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	Mailing Address 171 W RANDO	DLPH ST				L	1 1	1 5	20	10
	City CHICAGO		State IL	Zip Code 60601		A	mount of E	ach Disb	ursement th	
	Purpose of Disbu	ırsement			, ,	ا ۱ ۲			41	4.29
	Candidate Name				Category Type	/ [N	IEMO ITI	EM]		
	Office Sought:	House Senate President District:	Disbursement Fo Primary Other (s							
С.	State: Full Name (Last, OCEAN PRIM	First, Middle Initial)					ansaction		21CCD.39)
	Mailing Address 2205 N WEST	SHORE BLVD					M M /	15	y žo	10
	City TAMPA		State FL	Zip Code 33607		A	mount of E	ach Disb	ursement th	is Period
	Purpose of Disbu					ا [30	2.52
	Candidate Name				Category Type	/ [N	IEMO ITI	EM]		
	Office Sought:	House Senate President	Disbursement Fo Primary Other (s							
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NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEMEN									
Full Name (Last, First, Middle Initial) OFFICE DEPOT				Da	te of Disb	oursemer			
Mailing Address PO BOX 88040				1	1 /	15	Ž Ž Q	10°	
City CHICAGO	State IL	Zip Code 60680		An	nount of E	Each Disk	oursement th		-
Purpose of Disbursement OFFICE SUPPLIES				╗╽└			44	47.07	
Candidate Name Office Sought: House	Disbursement For		Category Type	/ [ME	EMO ITE	EM]			
Senate President State: District:	Primary								
Full Name (Last, First, Middle Initial) RITZ INTERACTIVE INC Mailing Address 2010 MAIN ST STE 400				Da 1	te of Disk	oursemer 1 5	Ý 20	í o '	
City IRVINE Purpose of Disbursement	State CA	Zip Code 92614		An	nount of E	ach Disk	oursement the	his Pe 50.29	-
PHOTOGRAPHY SERVICE Candidate Name			Category Type	/ [МЕ	EMO ITE	EM]			
Office Sought: House Senate President State: District:	Disbursement For Primary Other (s								
Full Name (Last, First, Middle Initial) SHELL OIL COMPANY				Da	nsaction te of Disk			8 10	7
Mailing Address 910 LOUISIANA ST City	State	Zip Code					oursement the	ū	
HOUSTON Purpose of Disbursement TRAVEL	TX	77002	• •	7 C			28	85.28	3
Candidate Name			Category Type	/ [ME	EMO ITE	EM]			
Office Sought: House Senate President State: District:	Disbursement For Primary Other (s		- •						

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or for commercial purposes, other than using the r				
NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEMENTS F	OR THE 20	12 REPUBLICA	N NATION	NAL CONVENTION
Full Name (Last, First, Middle Initial)				Transaction ID: SB21CCD.59
SOUTHWEST AIRLINES				Date of Disbursement
Mailing Address PO BOX 36647				111 D 15 / Y 2010 Y
City DALLAS	State TX	Zip Code 75235		Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL			•	472.80
Candidate Name			Category Type	[MEMO ITEM]
Senate President	Primary Other (s			
State: District: Full Name (Last, First, Middle Initial)				
US AIRWAYS				Transaction ID: SB21CCD.64 Date of Disbursement
Mailing Address 4000 E SKY HARBOR BLVD				11 15 2010
City PHOENIX	State AZ	Zip Code 85034		Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL				725.40
Candidate Name			Category, Type	[MEMO ITEM]
Office Sought: Senate President State: Disbrict:	ursement For: Primary Other (s			
Full Name (Last, First, Middle Initial) BB&T BUSINESS VISA CARD				Transaction ID: SB21ACCP.2 Date of Disbursement
Mailing Address PO BOX 24747				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City TAMPA	State FL	Zip Code 33623		Amount of Each Disbursement this Period
Purpose of Disbursement CREDIT CARD PAYMENT			, ,	7162.46
Candidate Name			Category Type	
Senate President	ursement For Primary Other (s			
State: District:				

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					son for the purpose of soliciting contributions o solicit contributions from such committee
	NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEMEN	TS FOR THE 20	012 REPUBLICA	N NATION	IAL CONVENTION
Α.	Full Name (Last, First, Middle Initial) BB&T				Transaction ID: SB21CCD.1 Date of Disbursement
	Mailing Address 1640 BELLE VIEW BLVD				
	City ALEXANDRIA	State VA	Zip Code 22307		Amount of Each Disbursement this Period
	Purpose of Disbursement REFUND- BANK FEE				-35.00
	Candidate Name			Category/ Type	[MEMO ITEM]
	Office Sought: House Senate President	Disbursement Fo Primary Other (s			
_	State: District:				
В.	Full Name (Last, First, Middle Initial) BUDGET RENT-A-CAR Mailing Address				Transaction ID: SB21CCD.19 Date of Disbursement 10 0 4 2 0 1 0
	6 SYLVAN WAY				
	City PARSIPPANY	State NJ	Zip Code 07054		Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL				410.86
	Candidate Name			Category/ Type	[MEMO ITEM]
	Office Sought: House Senate President State: District:	Disbursement Fo Primary Other (s			
 С.	Full Name (Last, First, Middle Initial) DEJA VU CONSIGNMENT FURNI	TUDE			Transaction ID: SB21CCD.13
	Mailing Address 1601 34TH ST N	TOTIL			Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City ST PETERSBURG	State FL	Zip Code 33713		Amount of Each Disbursement this Period
	Purpose of Disbursement FURNITURE PURCHASE				818.23
	Candidate Name			Category/ Type	[MEMO ITEM]
	Office Sought: House Senate President	Disbursement Fo Primary Other (:			
_	State: District:		<u>. </u>		
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	NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEME	NTS FOR THE 20)12 REPUBLICA	N NATIONA	AL CONVENTION					
A.	Full Name (Last, First, Middle Initial) ENTERPRISE RENT-A-CAR				Transaction ID: SI Date of Disburseme	nt				
	Mailing Address 600 CORPRATE PARK DR				10 / 04	2010				
	City ST LOUIS	State MO	Zip Code 63105		Amount of Each Dis	bursement this Period				
	Purpose of Disbursement TRAVEL					1040.30				
	Candidate Name			Category/ Type	[MEMO ITEM]					
	Office Sought: House Senate President	Disbursement For Primary Other (s								
_	State: District:									
В.	Full Name (Last, First, Middle Initial) ISLAND PRINT SHOP				Transaction ID: SI Date of Disburseme	nt				
	Mailing Address 112 SAINT CLAIRE PLACE STE	101			10 0 4	Y ŽOŤO Y				
	City STEVENSVILLE	State MD	Zip Code 21666		Amount of Each Dis	bursement this Period				
	Purpose of Disbursement PRINTING				L	533.18				
	Candidate Name			Category/ Type	[MEMO ITEM]					
	Office Sought: House Senate President	Disbursement For Primary Other (s								
_	State: District: Full Name (Last, First, Middle Initial)					204000.00				
C.	PMI PARKING				Transaction ID: SI Date of Disburseme	nt				
	Mailing Address 1725 DESALES ST NW STE 200)			10 / 04	Y Y O TOY				
	City WASHINGTON	State DC	Zip Code 20036		Amount of Each Dis	bursement this Period				
	Purpose of Disbursement TRAVEL					440.00				
	Candidate Name			Category/ Type	[MEMO ITEM]					
	Office Sought: House Senate President	Disbursement For Primary Other (s								
	State: District:									
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NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEMEN	<u>-</u>							0001			
Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES					Date o	of Disbu	urse	ment	CCD.27	7	
Mailing Address PO BOX 36647					1 ^M 0	M /	0	4 /	Ž 0	10	Y
City DALLAS	State TX	Zip Code 75235			Amou	nt of Ea	ach I	Disburs	sement th	nis Pe	eriod
Purpose of Disbursement TRAVEL					L.				70)1.20	0
Candidate Name			Category Type		[MEM	O ITE	:M]				
Office Sought: House Senate President State: District:	Disbursement For Primary Other (s										
Full Name (Last, First, Middle Initial) TAMPA BAY CONVENTION BUF Mailing Address 401 E JACKSON ST #2100	EAU				Date o	action I of Disbu		ment	CCD.4	ť 0	Y
City TAMPA	State FL	Zip Code 33602			Amou	nt of Ea	ach I	Disburs	sement th	-	-
Purpose of Disbursement EVENT COLLATERAL MATERIALS									34	10.00	0
Candidate Name			Category, Type	[/]	[MEM	O ITE	M]				
Office Sought: House Senate President State: District:	Disbursement For Primary Other (s										
Full Name (Last, First, Middle Initial) US AIRWAYS					Date o	nction I	urse	ment	CCD.28		Y
Mailing Address 4000 E SKY HARBOR BLVD					1 0		^D 0	4	2 0	ť 0	
City PHOENIX	State AZ	Zip Code 85034			Amou	nt of Ea	ach I	Disburs	sement th	nis Pe	eriod
Purpose of Disbursement TRAVEL					L.	•	•		115	54.80	0
Candidate Name			Category, Type	/	[MEM	O ITE	M]				
Office Sought: House Senate President State: District:	Disbursement For Primary Other (s										
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Α.	•	First, Middle Initial) SS VISA CARD				Transaction ID: SB21ACCP.3 Date of Disbursement
	Mailing Address PO BOX 24747	7				12 M / D D / Y 2 O 1 O Y
	City TAMPA		State FL	Zip Code 33623		Amount of Each Disbursement this Period
	Purpose of Disbu CREDIT CARD					4418.99
	Candidate Name				Category/ Type	
	Office Sought:	House Senate President	Disbursement For Primary Other (s			
-	State:	District:				
В.	DOLLAR REN	First, Middle Initial) Γ-A-CAR				Transaction ID: SB21CCD.88 Date of Disbursement
	Mailing Address PO BOX 33167	7				12 M / D D / Y Y Y Y Y Y Y
	City TULSA		State OK	Zip Code 74153		Amount of Each Disbursement this Period
	Purpose of Disbu TRAVEL	rsement				1787.24
	Candidate Name				Category/ Type	[MEMO ITEM]
	Office Sought: State:	House Senate President District:	Disbursement For Primary Other (s			
С.	Full Name (Last,	First, Middle Initial)				Transaction ID: SB21CCD.85
٥.	RITZ CAMERA	CENTERS				Date of Disbursement 1 2 0 7 2 0 1 0
	Mailing Address 6711 RITZ WA	Υ				12 D D C Y 2010 Y
	City BELTSVILLE		State MD	Zip Code 20705		Amount of Each Disbursement this Period
	Purpose of Disbu PHOTOGRAPH					416.22
	Candidate Name				Category/ Type	[MEMO ITEM]
	Office Sought:	House Senate President	Disbursement For Primary Other (s			
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SCHEDULE B (FEC Form 4)

FOR LINE NUMBER: PAGE 22/28 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page χ 21a 22 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) COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLICAN NATIONAL CONVENTION Full Name (Last, First, Middle Initial) Transaction ID: SB21CCD.91 **SOUTHWEST AIRLINES** Date of Disbursement 07 2010 Mailing Address PO BOX 36647 Zip Code City State Amount of Each Disbursement this Period **DALLAS** TX 75235 312.40 Purpose of Disbursement **TRAVEL** Candidate Name Category/ [MEMO ITEM] Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB21CCD.86 **VERIZON** Date of Disbursement 07 2010 Mailing Address **PO BOX 553** City State Zip Code Amount of Each Disbursement this Period WARRENDALE 15086 PA 258.83 Purpose of Disbursement TELEPHONE SERVICE Candidate Name Category/ [MEMO ITEM] Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB21A.22 BLUECROSS BLUESHIELD OF FLORIDA Date of Disbursement 0 4 2010 Mailing Address 8400 NW 33RD ST STE 100 City State Zip Code Amount of Each Disbursement this Period MIAMI FL 33122 1427.50 Purpose of Disbursement **INSURANCE** Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District:

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A.	Full Name (Last, Fire BLUECROSS BL	,	FLORIDA			Transaction ID: SB Date of Disbursemen	t
	Mailing Address 8400 NW 33RD S	ST STE 100				111 22	Ź 0 Ĭ 0 Š
	City MIAMI		State FL	Zip Code 33122		Amount of Each Disk	
	Purpose of Disburse INSURANCE	ement]	1825.25
	Candidate Name				Category/ Type		
	Office Sought:	House Senate President	Disbursement For Primary Other (s				
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В.			FLORIDA			Transaction ID: SB Date of Disbursemen	t
	Mailing Address 8400 NW 33RD S	ST STE 100				12 M / 26	Ž O Ĭ O Š
	City MIAMI		State FL	Zip Code 33122		Amount of Each Disk	
	Purpose of Disburse INSURANCE	ement]	1588.75
	Candidate Name				Category/ Type		
	Office Sought:	House Senate President	Disbursement For Primary Other (s				
-	State: Di	istrict:					
C.			OF VA LLC			Transaction ID: SB Date of Disbursemen	t
	Mailing Address PO BOX 365					1 1 1 0 4	Y ŽOŤOŤ
	City MCLEAN		State VA	Zip Code 22101		Amount of Each Disk	
	Purpose of Disburse COMPLIANCE CC					1	7500.00
	Candidate Name				Category/ Type		
	Office Sought:	House Senate President	Disbursement For Primary Other (s				
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SCHEDULE B (FEC Form 4)

FOR LINE NUMBER: PAGE 24/28 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page χ 21a 22 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) COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLICAN NATIONAL CONVENTION Full Name (Last, First, Middle Initial) Transaction ID: SB21A.39 COMPLIANCE CONSULTING CO OF VA LLC Date of Disbursement 10 2010 Mailing Address **PO BOX 365** City State Zip Code Amount of Each Disbursement this Period **MCLEAN** VA 22101 7500.00 Purpose of Disbursement **COMPLIANCE CONSULTING** Candidate Name Category/ Type Office Sought: House Disbursement For: General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB21A.6 COMPLIANCE CONSULTING CO OF VA LLC Date of Disbursement 18 2010 Mailing Address **PO BOX 365** City State Zip Code Amount of Each Disbursement this Period **MĆLEAN** 22101 V۸ 7500.00 Purpose of Disbursement COMPLIANCE CONSULTING Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB21A.26 FIVE WAVE CONCEPTS LLC Date of Disbursement 2 2 2010 Mailing Address 4258 MAYFAIR LN State Zip Code Amount of Each Disbursement this Period **PORT ORANGE** FL 32129 10500.00 Purpose of Disbursement **INSURANCE** Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District:

SUBTOTAL of Disbursements This Page (optional) ...

TOTAL This Period (last page this line number only)

IIIIa	ge# 11930423426				
	SCHEDULE B (FEC Form 4) TEMIZED DISBURSEMENTS	Use separate school for each category Detailed Summary	of the (FOR LINE NUMBER: (check only one)	PAGE 25 / 28
	any Information copied from such Reports and Statements mr for commercial purposes, other than using the name and a			son for the purpose of solici	ting contributions
	NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEMENTS FOR THE	2012 REPUBLICAN	N NATION	IAL CONVENTION	
Α.	Full Name (Last, First, Middle Initial) HOLTZMAN VOGEL PLLC			Transaction ID: S Date of Disburseme	ent
	Mailing Address 45 NORTH HILL DR STE 100			12 2 1	2010
	City State WARRENTON VA	Zip Code 20186		Amount of Each Dis	bursement this Period
	Purpose of Disbursement LEGAL CONSULTING				60000.00
	Candidate Name		Category/ Type		
	Office Sought: House Disbursement F Senate President Other				
_	State: District:				
В.	Full Name (Last, First, Middle Initial) ODELL PHOTOS			Transaction ID: S Date of Disburseme	ent
	Mailing Address 216 OLD LINE DR			12 26	Y ŽOŽOŠ
	City State CENTREVILLE MD	Zip Code 21617		Amount of Each Dis	bursement this Period
	Purpose of Disbursement PRINTING]	300.00
	Candidate Name		Category/ Type		
	Office Sought: House Disbursement F				
_	Full Name (Last, First, Middle Initial)			Transaction ID: S	R21A 20
C.	SUN VISTA REALTY			Date of Disburseme	ent
	Mailing Address 19455 GULF BLVD #1			111 / 24	2010
	City State INDIAN SHORES FL	Zip Code 33785		Amount of Each Dis	bursement this Period
	Purpose of Disbursement RENT				4500.00
	Candidate Name		Category/ Type		
	Office Sought: House Disbursement F Senate Prima President Other				
	State: District:				
1	SUBTOTAL of Disbursements This Page (optional)			.	64800.00

В.

C.

age# 11930425429									
SCHEDULE B (FEC Form ITEMIZED DISBURSEMEN	,	Use separate sch for each category Detailed Summan	of the	(check	INE NUME only one)		PAGE 2		
Any Information copied from such Reports					e purpose		ing contribu	tions	24a
or for commercial purposes, other than using	g the name and add	ress of any politica	committee	to solicit o	contribution	ns from s	uch commit	itee ——	
NAME OF COMMITTEE (In Full) COMMITTEE ON ARRANGEMEN	NTS FOR THE 20	12 REPUBLICA	N NATIOI	NAL COI	NVENTIC	ON			
Full Name (Last, First, Middle Initial)				Tra	ansaction	ID: SE	321A.58		
SUN VISTA REALTY					ate of Disl			V *	V
Mailing Address 19455 GULF BLVD #1					M 2 M /	^D 3 1	Ž) 1 0	Y
City INDIAN SHORES	State FL	Zip Code 33785		А	mount of E	Each Dist	oursement t	his P	eriod
Purpose of Disbursement	1.5	33763		_ [15	00.00	0
RENT									
Candidate Name			Category Type	"/					
Office Sought: House Senate President	Disbursement For Primary Other (s								
State: District:									
Full Name (Last, First, Middle Initial) SUN VISTA REALTY Mailing Address				D	ansaction ate of Dist	_	nt) 1 0	Y
19455 GULF BLVD #1 City	State	Zip Code		Δ	mount of F	Each Diek	oursement t	hie P	erind
INDIAN SHORES	FL	33785			inount of L	Lacii Disi			-
Purpose of Disbursement RENT							45	00.00	0
Candidate Name			Category Type	1/					
Office Sought: House Senate President	Disbursement For Primary								
State: District:	Guici (d	,pcony) ▼							
Full Name (Last, First, Middle Initial) YUMA SOLUTIONS				D	ansaction ate of Dist	oursemer	nt		
Mailing Address PO BOX 152075					1 2 M	^D 2 6	ž) 1 O	Y
City TAMPA	State FL	Zip Code 33684		A	mount of E	Each Dist	oursement t		-
Purpose of Disbursement TELEPHONE SERVICE/EQUIPMEN Candidate Name	T PURCHASE		Category Type				. 66	77.0	0
Office Sought: House Senate President State: District:	Disbursement For Primary Other (s		т урс						

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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12677.00

SCHEDULE C (FEC Form 4)

LOANS

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

PAGE 27 / 28 FOR LINE 16a OF FORM 4

	Betailed 60	animary rage	
NAME OF COMMITTEE (In Full)	•	<u>.</u>	
COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLIC	CAN NATIONA		
		Transaction	on ID: SC/10.4103
LOAN SOURCE Full Name (Last, First, Middle Initial)			tion:
BB&T			Primary
INTEREST RATE - LIBOR VAR-			General
Mailing Address 1909 K STREET NWBASE POINTS			Other (specify)
City WASHINGTON State DC ZIP Co	ode 20006		
Original Amount of Loan Cumulative Payment To	o Date	Balance Ou	utstanding at Close of This Period
1000000.00	0.00		1000000.00
TERMS		Laterral Date	Occurrent
Date Incurred Date Due		Interest Rate	Secured:
M M D D D Y Y Y Y O 05/30/2012		0.0000	% (apr) X Yes No
List All Fundaments on Commentant (if any) to Loop Comme			
List All Endorsers or Guarantors (if any) to Loan Source Full Name (Last, First, Middle Initial)	Nome of Face	Novor	
Full Name (Last, First, Middle Initial)	Name of Emp	oloyer	
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed		
Oily State 211 Gode	Outstanding:		
Full Name (Last, First, Middle Initial)	Name of Emp	loyer	
Mailing Address	Occupation		
	Amount	1 1 1 1	
City State ZIP Code	Guaranteed Outstanding:		
Full Name (Last, First, Middle Initial)		alou rom	
Full Name (Last, First, Middle Initial)	Name of Emp	lioyei	
Mailing Address	Occupation		
	A		
City Chate 7/D Carda	Amount Guaranteed		
City State ZIP Code	Outstanding:		
Full Name (Last, First, Middle Initial)	Name of Emp	oloyer	
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed		
Sity State Zii Gode	Outstanding:		
			1000000.00
SUBTOTALS This Period This Page (optional)		. •	100000.00
TOTALS This Period (last page in this line only)		•	100000.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Sch	nedule D, carry fo	rward to appropria	ite line of Summary.

SCHEDULE C-1 (FEC Form 4)

Supplementary for Information found on

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS Page $\frac{28/28}{}$ of Schedule C Federal Election Commission, Washington, D.C. 20463 **FEC IDENTIFICATION NUMBER** Name of Committee (in Full) COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLICAN NATIONAL CONVENTION C00485110 **LENDING INSTITUTION (LENDER)** Interest Rate (APR) Amount of Loan Full Name BB&T 1000000.00 0.00000 % Mailing Address 1909 K STREET NW 06 21 2010 Date Incurred or Established Zip Code 05 30 2012 State Date Due WASHINGTON DC 20006 X No A. Has loan been restructured? Yes If yes, date originally incurred: B. If line of credit, Total Outstanding 1000000.00 1000000.00 Amount of this Draw: balance: C. Are other parties secondarily liable for the debt incurred? Yes (Endorsers and guarantors must be reported on Sch. C) D. Are any of the following pledged as collateral for the loan: real estate, personal What is the value of this collateral? property, goods, negotiable instruments, certificates of deposit, chattel papers, 70000000.00 stocks, accounts receivable, cash on deposit, or other similar traditional collateral? No χ Yes If yes, specify: Does the lender have a perfected security CHATTEL PAPER. DEPOSIT ACCTS.. GENERAL INTANGIBLE & PERSONAL PROPERTY X Yes No interest in it? E. Are any future contributions or future receipts of interest income, pledged as What is the estimated value? collateral for the loan? X No Yes If yes, specify: 0.00 A depository account must be established pursuant Location of account to 11 CFR 100.82 and 100.142. Address: Date account established: City, State, Zip: F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment. G. COMMITTEE TREASURER DATE **LOUIS POPE** Typed Name 07 15 2010 Signature H. Attach a signed copy of the loan agreement. I. TO BE SIGNED BY THE LENDING INSTITUTION:

are accurate as stated above.

- I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at to 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE		DATE		
Typed Name WILLIAM J. ZIEGLER		-	-	
Signature	Title SR. VICE-PRESIDENT	0 7	1 5	2010