

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

THE NATIONAL REPUBLICAN TRUST PAC

ADDRESS (number and street)

2021 L ST NW

STE 101-340

Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20036-4909

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00455378

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

WHEELER, SCOTT, L, ,

Type or Print Name of Treasurer

Signature of Treasurer

WHEELER, SCOTT, L, ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

THE NATIONAL REPUBLICAN TRUST PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2020 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2020		1961.47
(b) Cash on Hand at Beginning of Reporting Period.....	2734.03	
(c) Total Receipts (from Line 19)	42660.00	83611.10
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	45394.03	85572.57
7. Total Disbursements (from Line 31).....	18693.01	58871.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	26701.02	26701.02
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	30494.05	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

THE NATIONAL REPUBLICAN TRUST PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 / 01 / 2020

To:

M M / D D / Y Y Y Y
09 / 30 / 2020
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

20201.00

30515.00

(ii) Unitemized

16453.00

42475.11

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

36654.00

72990.11

(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)

36654.00

72990.11

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

49.99

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

6006.00

10571.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

42660.00

83611.10

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

42660.00

83611.10

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	15630.65	51000.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	15630.65	51000.03
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	3062.36	7871.52
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	18693.01	58871.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18693.01	58871.55

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	36654.00	72990.11
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	36654.00	72990.11
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	15630.65	51000.03
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	49.99
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15630.65	50950.04

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB
.

Form/Schedule: F3XA
Transaction ID :

THIS REPORT HAS BEEN AMENDED TO UPDATE THE JAN. 1, 2020 STARTING COH.

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 73

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AHLFELD, KEN, E, ,

Mailing Address 55 W MARKET ST

City
WABASH

State
IN

Zip Code
46992-3128

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BUCHERI MCCARTY AND METZ LLP

Occupation (for Individual)
CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 19 / 2020

Transaction ID : A59C9160569464F8EAB7

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ALDRIDGE, MARGARET, , MS.,

Mailing Address 948 FRANGIPANI DRIVE

City
SEBASTIAN

State
FL

Zip Code
32976

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 10 / 2020

Transaction ID : A4490A7E109A44EC59B1

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AMINZIA, NORBERT, , MR.,

Mailing Address 31 LLEWELLYN AVE

City
WEST ORANGE

State
NJ

Zip Code
07052

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 20 / 2020

Transaction ID : A62724A360C2D4246A0E

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

125.00

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 73

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. ANDERSON, KAHERINE, , MRS.,

Mailing Address 13710 SUNRISE BLUFF RD

City
MIDLOTHIAN

State
VA

Zip Code
23112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 09 / 2020

Transaction ID : A8D570088623E4F38802

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ANDERSON, KATHERINE, E, MRS.,

Mailing Address 13710 SUNRISE BLUFF RD

City
MIDLOTHIAN

State
VA

Zip Code
23112

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 17 / 2020

Transaction ID : A5F8B93C11FAB4CADB97

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARRY, DONALD, E, MR.,

Mailing Address 42 HIGHBUSH CT

City
THE WOODLANDS

State
TX

Zip Code
77381-6602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2020

Transaction ID : AAC96C23419DB4503937

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1600.00

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 73

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. BARRY, DONALD, E, MR.,

Mailing Address 42 Highbush Ct

City

THE WOODLANDS

State

TX

Zip Code

77381-6602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

MM / DD / YYYY
07 / 25 / 2020

Transaction ID : AB2331BDA0BE940F3896

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BARRY, DONALD, E, MR.,

Mailing Address 42 Highbush Ct

City

THE WOODLANDS

State

TX

Zip Code

77381-6602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

MM / DD / YYYY
09 / 12 / 2020

Transaction ID : A60EC0C498C7F4B27A6F

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BARRY, DONALD, E, MR.,

Mailing Address 42 Highbush Ct

City

THE WOODLANDS

State

TX

Zip Code

77381-6602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

515.00

Date of Receipt

MM / DD / YYYY
09 / 29 / 2020

Transaction ID : A404E24F6D7B844E0899

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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 10 OF 73

☒ 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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEATTY, HOWARD, W., MR.,

Mailing Address POBOX 5331

City
NAPERVILLE

State
IL

Zip Code
60567

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 24 / 2020

Transaction ID : AA1364CFB759547BD95E

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEATTY, HOWARD, W., MR.,

Mailing Address POBOX 5331

City
NAPERVILLE

State
IL

Zip Code
60567

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 24 / 2020

Transaction ID : AD5D436713FC24ABF8F9

Amount of Each Receipt this Period

17.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEATTY, HOWARD, W., MR.,

Mailing Address POBOX 5331

City
NAPERVILLE

State
IL

Zip Code
60567

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 24 / 2020

Transaction ID : A4BA2EECB9942442A852

Amount of Each Receipt this Period

17.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

51.00

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 73

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. BECKMANN, KLAUS, , MR.,

Mailing Address PO BOX 167

City
AMSTERDAM

State
NY

Zip Code
12010-0167

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

07 / 14 / 2020

Transaction ID : AA11100B77FDC43778BC

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BECKMANN, KLAUS, , MR.,

Mailing Address PO BOX 167

City
AMSTERDAM

State
NY

Zip Code
12010-0167

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

08 / 21 / 2020

Transaction ID : AC313443815A542F2BE8

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BECKMANN, KLAUS, , MR.,

Mailing Address PO BOX 167

City
AMSTERDAM

State
NY

Zip Code
12010-0167

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

09 / 15 / 2020

Transaction ID : A86F6E36C3DC24CACA15

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

600.00

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 73

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEIN, RICHARD, P, DR.,

Mailing Address 4101 MARTIN TAYLOR CT

City
ANNANDALE

State
VA

Zip Code
22003-1881

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY
07 / 29 / 2020

Transaction ID : A5BA8AF930F0340C49E2

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BEIN, RICHARD, P, DR.,

Mailing Address 4101 MARTIN TAYLOR CT

City
ANNANDALE

State
VA

Zip Code
22003-1881

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
09 / 02 / 2020

Transaction ID : AEFBE0D391D24249849

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BEIN, RICHARD, P, DR.,

Mailing Address 4101 MARTIN TAYLOR CT

City
ANNANDALE

State
VA

Zip Code
22003-1881

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY
09 / 15 / 2020

Transaction ID : A51DB8C726CF24B4BA70

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

60.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BEIN, RICHARD, P, DR.,

Mailing Address 4101 MARTIN TAYLOR CT

City
ANNANDALE

State
VA

Zip Code
22003-1881

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 18 / 2020

Transaction ID : AB734C687A3EB4A1DAFC

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BLACKBURNE, EDWARD, , MR.,

Mailing Address P.O. BOX 2039

City
CONROE

State
TX

Zip Code
77305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TUBULAR PERFORATING MFG.

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2020

Transaction ID : A4C23DBC32EF84526A72

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BLACK, ROBERT, P, MR.,

Mailing Address 2133 CEDARFIELD LN

City
HENRICO

State
VA

Zip Code
23233-1937

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2020

Transaction ID : A612885CE14B74F2090B

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

760.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BLACK, ROBERT, P, MR.,

Mailing Address 2133 CEDARFIELD LN

City
HENRICO

State
VA

Zip Code
23233-1937

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 07 / 2020

Transaction ID : A223C1D74545C4CB4867

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BLACK, ROBERT, P, MR.,

Mailing Address 2133 CEDARFIELD LN

City
HENRICO

State
VA

Zip Code
23233-1937

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

09 / 14 / 2020

Transaction ID : A49BE40FAD5F74014BAA

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CALHOUN, JOHN, , MR.,

Mailing Address 10049 OLDFIELD DRIVE

City
RICHMOND

State
VA

Zip Code
23235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLDWELL BANKER

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

07 / 06 / 2020

Transaction ID : A7B0DDB607669476A9B8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1200.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CALHOUN, JOHN, , MR.,

Mailing Address 10049 OLDFIELD DRIVE

City
RICHMOND

State
VA

Zip Code
23235

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COLDWELL BANKER

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

09 / 17 / 2020

Transaction ID : A21C63D22846F446588B

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CORDOVA, ARTHUR, , MRS.,

Mailing Address 2702 PUEBLO GRANDE TRL NW

City
ALBUQUERQUE

State
NM

Zip Code
87120-3146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

07 / 03 / 2020

Transaction ID : AFE257378A1394C218C7

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CORDOVA, ARTHUR, , MRS.,

Mailing Address 2702 PUEBLO GRANDE TRL NW

City
ALBUQUERQUE

State
NM

Zip Code
87120-3146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 31 / 2020

Transaction ID : A25918094B07741A788D

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

850.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CORDOVA, ARTHUR, , MRS.,

Mailing Address 2702 PUEBLO GRANDE TRL NW

City
ALBUQUERQUE

State
NM

Zip Code
87120-3146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

09 / 03 / 2020

Transaction ID : A427248FD56EB4F35A9A

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CORDOVA, ARTHUR, , MRS.,

Mailing Address 2702 PUEBLO GRANDE TRL NW

City
ALBUQUERQUE

State
NM

Zip Code
87120-3146

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 18 / 2020

Transaction ID : ADE5BAB143A864230A23

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVIS, PAM, , MS.,

Mailing Address 55 HACIENDA CARMEL

City
CARMEL

State
CA

Zip Code
93923-9560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.00

Date of Receipt

08 / 21 / 2020

Transaction ID : A48E615F767094A4BAE2

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

410.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIS, PAM, , MS.,

Mailing Address 55 HACIENDA CARMEL

City
CARMEL

State
CA

Zip Code
93923-9560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

09 / 02 / 2020

Transaction ID : AA79C36966FA54633B6B

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DAVIS, PAM, , MS.,

Mailing Address 55 HACIENDA CARMEL

City
CARMEL

State
CA

Zip Code
93923-9560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

09 / 09 / 2020

Transaction ID : AF2F82B679B044840BF2

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVIS, PAM, , MS.,

Mailing Address 55 HACIENDA CARMEL

City
CARMEL

State
CA

Zip Code
93923-9560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

09 / 20 / 2020

Transaction ID : AE2EC0B8C3011449CBAA

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

60.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIS, PAM, , MS.,

Mailing Address 55 HACIENDA CARMEL

City
CARMEL

State
CA

Zip Code
93923-9560

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2020

Transaction ID : A8C11B8B045C540F0882

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DOOLEY, DAVID, , DR.,

Mailing Address 100 WORTH AVE APT 511

City

PALM BEACH

State

FL

Zip Code

33480

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MJW CORPORATION

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 18 / 2020

Transaction ID : A9FC5B4291DD340D0B10

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EGAN, SHOSHANA, , ,

Mailing Address 3758 VIA DEL CONQUISTADOR

City

SAN DIEGO

State

CA

Zip Code

92117-5741

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 26 / 2020

Transaction ID : A0C025F08E6EC4CB885D

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

765.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FREYMANN, MARIA, , MRS.,

Mailing Address 1329H MOANALUALANI WAY
H

City
HONOLULU

State
HI

Zip Code
96819

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKER

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 22 / 2020

Transaction ID : AA5584AA312174C37874

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FREYMANN, MARIA, , MRS.,

Mailing Address 1329H MOANALUALANI WAY
H

City
HONOLULU

State
HI

Zip Code
96819

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOMEMAKER

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2020

Transaction ID : A35BF6336BC634B41BD5

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FROESCHLE, THOMAS, , ,

Mailing Address 110 STUART ST

City
BOSTON

State
MA

Zip Code
02116

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2020

Transaction ID : A5B37A97A1C2B48FFB9E

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

350.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOODYEAR, PRISCILLA, A, ,

Mailing Address 10042 SIGNET CIR

City
HUNTINGTON BEACH

State
CA

Zip Code
92646-6631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 24 / 2020

Transaction ID : A9405427F67E84796BEE

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOODYEAR, PRISCILLA, A, ,

Mailing Address 10042 SIGNET CIR

City
HUNTINGTON BEACH

State
CA

Zip Code
92646-6631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 04 / 2020

Transaction ID : A9808585AD9CF447AA46

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOODYEAR, PRISCILLA, A, ,

Mailing Address 10042 SIGNET CIR

City
HUNTINGTON BEACH

State
CA

Zip Code
92646-6631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2020

Transaction ID : AC28511D75517490180D

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

300.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAHN, ROBERT, F., MR.,

Mailing Address 114 WOODBRIDGE RD

City
MARLTON

State
NJ

Zip Code
08053-1121

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 07 / 2020

Transaction ID : A0172090E8A2346EEA11

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAHN, ROBERT, F., MR.,

Mailing Address 114 WOODBRIDGE RD

City
MARLTON

State
NJ

Zip Code
08053-1121

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

09 / 17 / 2020

Transaction ID : ABD8779BF7A9046FDB3E

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAHN, ROBERT, F., MR.,

Mailing Address 114 WOODBRIDGE RD

City
MARLTON

State
NJ

Zip Code
08053-1121

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

09 / 26 / 2020

Transaction ID : A822ADC0062584020819

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

30.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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<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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAHN, ROBERT, F., MR.,

Mailing Address 114 WOODBRIDGE RD

City
MARLTONState
NJZip Code
08053-1121FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2020

Transaction ID : AFE0CBE40B2C4440C87E

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMMANN, PAUL, , MR.,

Mailing Address 1710 8TH AVE SW

City
PUYALLUPState
WAZip Code
98371FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FIRST AMERICAN TITLE INSURANCE COMPANYOccupation (for Individual)
TITLE INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2020

Transaction ID : A0A825C3BA3FC4462834

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMMANN, PAUL, , MR.,

Mailing Address 1710 8TH AVE SW

City
PUYALLUPState
WAZip Code
98371FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FIRST AMERICAN TITLE INSURANCE COMPANYOccupation (for Individual)
TITLE INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2020

Transaction ID : A460DAC41DB6D40F084C

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

90.00

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)

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☒ 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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAMMANN, PAUL, , MR.,

Mailing Address 1710 8TH AVE SW

City
PUYALLUP

State
WA

Zip Code
98371

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FIRST AMERICAN TITLE INSURANCE COMPANY

Occupation (for Individual)

TITLE INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

08 / 14 / 2020

Transaction ID : A5D7A2CD1778F4E23B0F

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMMANN, PAUL, , MR.,

Mailing Address 1710 8TH AVE SW

City
PUYALLUP

State
WA

Zip Code
98371

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FIRST AMERICAN TITLE INSURANCE COMPANY

Occupation (for Individual)

TITLE INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.00

Date of Receipt

08 / 27 / 2020

Transaction ID : A69D52245C9784E23A37

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMMANN, PAUL, , MR.,

Mailing Address 1710 8TH AVE SW

City
PUYALLUP

State
WA

Zip Code
98371

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FIRST AMERICAN TITLE INSURANCE COMPANY

Occupation (for Individual)

TITLE INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

805.00

Date of Receipt

08 / 28 / 2020

Transaction ID : AE155926298694DB0956

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

175.00

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

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

FOR LINE NUMBER: PAGE 24 OF 73
(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAMMANN, PAUL, , MR.,

Mailing Address 1710 8TH AVE SW

City
PUYALLUP

State
WA

Zip Code
98371

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FIRST AMERICAN TITLE INSURANCE COMPANY

Occupation (for Individual)

TITLE INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.00

Date of Receipt

09 / 08 / 2020

Transaction ID : A5EEC50F41A8A45B4B8A

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMMANN, PAUL, , MR.,

Mailing Address 1710 8TH AVE SW

City
PUYALLUP

State
WA

Zip Code
98371

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FIRST AMERICAN TITLE INSURANCE COMPANY

Occupation (for Individual)

TITLE INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

09 / 16 / 2020

Transaction ID : AD27BED4E22BA48FEB42

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAMMANN, PAUL, , MR.,

Mailing Address 1710 8TH AVE SW

City
PUYALLUP

State
WA

Zip Code
98371

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FIRST AMERICAN TITLE INSURANCE COMPANY

Occupation (for Individual)

TITLE INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

905.00

Date of Receipt

09 / 23 / 2020

Transaction ID : A371DFDC32EC3485FABE

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

100.00

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

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

FOR LINE NUMBER: PAGE 25 OF 73

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAMMANN, PAUL, , MR.,

Mailing Address 1710 8TH AVE SW

City
PUYALLUP

State
WA

Zip Code
98371

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FIRST AMERICAN TITLE INSURANCE COMPANY

Occupation (for Individual)

TITLE INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2020

Transaction ID : A514E2A598F0843458E2

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMMANN, PAUL, , MR.,

Mailing Address 1710 8TH AVE SW

City
PUYALLUP

State
WA

Zip Code
98371

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

FIRST AMERICAN TITLE INSURANCE COMPANY

Occupation (for Individual)

TITLE INSURANCE EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2020

Transaction ID : A8D11B87961B54577894

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARRIS, JAMES, E, MR.,

Mailing Address 3226 VISTA LAKE DR

City
SUGAR LAND

State
TX

Zip Code
77478-4426

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 10 / 2020

Transaction ID : AA89C9073D44C484BA41

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

125.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 73

<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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRIS, JAMES, E, MR.,

Mailing Address 3226 VISTA LAKE DR

City
SUGAR LANDState
TXZip Code
77478-4426FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2020

Transaction ID : ABD6B587CC60D48FAB93

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARRIS, JAMES, E, MR.,

Mailing Address 3226 VISTA LAKE DR

City
SUGAR LANDState
TXZip Code
77478-4426FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
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		19		2020

Transaction ID : AA7AC2BD1CBC74E1D847

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KILGORE, KEN, , ,

Mailing Address 4335 BUFORD SPUR

City
MOUNTAIN HOMEState
ARZip Code
72653-7671FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2020

Transaction ID : ACB913666BCC14A5B92A

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 27 OF 73

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. KINCHELOE, CURTIS, D, MR., JR

Mailing Address 6403 RIVER RD

City
PLEASANT VALLEY

State
MO

Zip Code
64068-7854

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 13 / 2020

Transaction ID : A6673D34F72BE4144A90

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KRAFT, NICKI, , ,

Mailing Address BOX 96

City
PENDROY

State
MT

Zip Code
59467

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 28 / 2020

Transaction ID : A36995B49B73A435C870

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LAMOTTE, BRADY, , MR.,

Mailing Address 10833 47TH AVENUE SOUTHEAST

City
EVERETT

State
WA

Zip Code
98208

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EDMENTUM

Occupation (for Individual)
SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 10 / 2020

Transaction ID : AD1C71D0F1B654846AC9

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1025.00

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

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

FOR LINE NUMBER: PAGE 28 OF 73

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEWIS, STEPHEN, , MR.,

Mailing Address 8018 MORROW RD

City
CLAY

State
MI

Zip Code
48001-3201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

08 / 10 / 2020

Transaction ID : A3B0DFDA93B3E42D78E8

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEWIS, STEPHEN, , MR.,

Mailing Address 8018 MORROW RD

City
CLAY

State
MI

Zip Code
48001-3201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

08 / 19 / 2020

Transaction ID : A9D7B6BAAFD684006913

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOMBARDI, JAMES, , MR.,

Mailing Address 1 FAIRHAVEN DRIVE
R

City
EAST LONGMEADOW

State
MA

Zip Code
01028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RUSS ELECTRIC

Occupation (for Individual)
FIELD SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2530.00

Date of Receipt

07 / 10 / 2020

Transaction ID : A10AE9FB88B2B48FE949

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

150.00

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

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

FOR LINE NUMBER: PAGE 29 OF 73

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. LOMBARDI, JAMES, , MR.,

Mailing Address 1 FAIRHAVEN DRIVE

R

City

EAST LONGMEADOW

State

MA

Zip Code

01028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RUSS ELECTRIC

Occupation (for Individual)

FIELD SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2630.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2020

Transaction ID : A53A393B07D42423CACC

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOMBARDI, JAMES, , MR.,

Mailing Address 1 FAIRHAVEN DRIVE

R

City

EAST LONGMEADOW

State

MA

Zip Code

01028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RUSS ELECTRIC

Occupation (for Individual)

FIELD SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2730.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 27 / 2020

Transaction ID : A3CD3162A64624A48902

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOMBARDI, JAMES, , MR.,

Mailing Address 1 FAIRHAVEN DRIVE

R

City

EAST LONGMEADOW

State

MA

Zip Code

01028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RUSS ELECTRIC

Occupation (for Individual)

FIELD SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2830.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 03 / 2020

Transaction ID : AC7552D59DC1F4FB7959

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

300.00

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

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

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

FOR LINE NUMBER: PAGE 30 OF 73

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. LOMBARDI, JAMES, , MR.,

Mailing Address 1 FAIRHAVEN DRIVE

R

City

EAST LONGMEADOW

State

MA

Zip Code

01028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RUSS ELECTRIC

Occupation (for Individual)

FIELD SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2930.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 12 / 2020

Transaction ID : AAF40DEF467104DE5876

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOMBARDI, JAMES, , MR.,

Mailing Address 1 FAIRHAVEN DRIVE

R

City

EAST LONGMEADOW

State

MA

Zip Code

01028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RUSS ELECTRIC

Occupation (for Individual)

FIELD SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3030.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 21 / 2020

Transaction ID : AD18259E3AF864F73B86

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOMBARDI, JAMES, , MR.,

Mailing Address 1 FAIRHAVEN DRIVE

R

City

EAST LONGMEADOW

State

MA

Zip Code

01028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RUSS ELECTRIC

Occupation (for Individual)

FIELD SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3130.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2020

Transaction ID : ABCA2FB2E33204210BE7

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

300.00

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

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

FOR LINE NUMBER: PAGE 31 OF 73

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. LOMBARDI, JAMES, , MR.,

Mailing Address 1 FAIRHAVEN DRIVE

R

City

EAST LONGMEADOW

State

MA

Zip Code

01028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RUSS ELECTRIC

Occupation (for Individual)

FIELD SERVICE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3230.00

Date of Receipt

09 / 01 / 2020

Transaction ID : A762A05D44AD147C888B

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOMBARDI, JAMES, , MR.,

Mailing Address 1 FAIRHAVEN DRIVE

R

City

EAST LONGMEADOW

State

MA

Zip Code

01028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RUSS ELECTRIC

Occupation (for Individual)

FIELD SERVICE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3330.00

Date of Receipt

09 / 09 / 2020

Transaction ID : AB2341566931C45F68DD

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LOMBARDI, JAMES, , MR.,

Mailing Address 1 FAIRHAVEN DRIVE

R

City

EAST LONGMEADOW

State

MA

Zip Code

01028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RUSS ELECTRIC

Occupation (for Individual)

FIELD SERVICE

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

3430.00

Date of Receipt

09 / 16 / 2020

Transaction ID : ADAEFD92D083E42D8A91

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

300.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LOMBARDI, JAMES, , MR.,

Mailing Address 1 FAIRHAVEN DRIVE

R

City
EAST LONGMEADOW

State
MA

Zip Code
01028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RUSS ELECTRIC

Occupation (for Individual)
FIELD SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3530.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2020

Transaction ID : A1064C67832424B6A916

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LONG, STEPHEN, , MR.,

Mailing Address 515 MARGARET LANE

City
WOODSTOCK

State
GA

Zip Code
30188

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
USAN

Occupation (for Individual)
PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2020

Transaction ID : AD3FEEDF2FA1284123BCA

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LORENZ, ALONAH, , ,

Mailing Address 160 40TH AVE SE

City
BENSON

State
MN

Zip Code
56215-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 07 / 2020

Transaction ID : A371024A74C54404FAC9

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

600.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MACHALE, LOIS, , MRS.,

Mailing Address 12352 PRISCILLA LANE

City
LOS ALTOS HILLS

State
CA

Zip Code
94022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 10 / 2020

Transaction ID : A0F4B42762A2B425B931

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARESCA, CAROL, , MRS.,

Mailing Address 2 GOODWIN AVENUE

City
WHITE PLAINS

State
NY

Zip Code
10607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NESTLE WATERS

Occupation (for Individual)
SENIOR ANALYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2020

Transaction ID : A07C8EB44D0EB40B0BF9

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCNAMARA, FRANCIS, , MR.,

Mailing Address 18608 WHITE RIM TRAIL

City
JONESTOWN

State
TX

Zip Code
78645

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2020

Transaction ID : AA4590C7D148C437AA2A

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

375.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MEISENHEIMER, JUDY, C., MRS.,

Mailing Address 1319 FAIRWAY DR

City
GRAHAM

State
TX

Zip Code
76450-4445

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
09 / 05 / 2020

Transaction ID : A4E2A2B02D172492B868

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MENDENHALL, LAURENCE, D, MR.,

Mailing Address 641 W PALM DR

City
PLACENTIA

State
CA

Zip Code
92870-2328

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY
08 / 23 / 2020

Transaction ID : A563A39C58A6B4720BF1

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MENTE, PHILLIP, A, MR.,

Mailing Address 2925 WILDERNESS ROAD

City
FORT WAYNE

State
IN

Zip Code
46845

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RAYTHEON CO

Occupation (for Individual)
SW ENGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

MM / DD / YYYY
07 / 04 / 2020

Transaction ID : AB81416AD03B542899A2

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

250.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOORE, DIANE, , MRS.,

Mailing Address 508 HOOT OWL LANE SOUTH

City
LEANDER

State
TX

Zip Code
78641-1740

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

07 / 02 / 2020

Transaction ID : A9F6DD81944F84884BDA

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOORE, DIANE, , MRS.,

Mailing Address 508 HOOT OWL LANE SOUTH

City
LEANDER

State
TX

Zip Code
78641-1740

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

08 / 05 / 2020

Transaction ID : AAA052FD91AFB4578B89

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOORE, DIANE, , MRS.,

Mailing Address 508 HOOT OWL LANE SOUTH

City
LEANDER

State
TX

Zip Code
78641-1740

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

08 / 07 / 2020

Transaction ID : A3CFF8D3B5C1B4B58879

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOORE, DIANE, , MRS.,

Mailing Address 508 HOOT OWL LANE SOUTH

City
LEANDER

State
TX

Zip Code
78641-1740

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

MM / DD / YYYY
08 / 28 / 2020

Transaction ID : A8D437CD4DAFC4280864

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOORE, DIANE, , MRS.,

Mailing Address 508 HOOT OWL LANE SOUTH

City
LEANDER

State
TX

Zip Code
78641-1740

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

MM / DD / YYYY
09 / 03 / 2020

Transaction ID : A25D59BCB7EB34BAC958

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MOORE, DIANE, , MRS.,

Mailing Address 508 HOOT OWL LANE SOUTH

City
LEANDER

State
TX

Zip Code
78641-1740

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

370.00

Date of Receipt

MM / DD / YYYY
09 / 25 / 2020

Transaction ID : A337B1662F57C4935A20

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

75.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOORE, DIANE, , MRS.,

Mailing Address 508 HOOT OWL LANE SOUTH

City
LEANDER

State
TX

Zip Code
78641-1740

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

09 / 25 / 2020

Transaction ID : AE03F346525A44B38852

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEWKIRK, MARILEE, P, MS.,

Mailing Address P O BOX 544

City
WARSAW

State
MO

Zip Code
65355

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

09 / 03 / 2020

Transaction ID : A6914F264C1DB420A9FF

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEWKIRK, MARILEE, P, MS.,

Mailing Address P O BOX 544

City
WARSAW

State
MO

Zip Code
65355

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

09 / 12 / 2020

Transaction ID : AC3BC6F97C4EC4AFC954

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

75.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NEWKIRK, MARILEE, P, MS.,

Mailing Address P O BOX 544

City
WARSAW

State
MO

Zip Code
65355

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

09 / 12 / 2020

Transaction ID : A7BF791FB48724BF AA13

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NEWKIRK, MARILEE, P, MS.,

Mailing Address P O BOX 544

City
WARSAW

State
MO

Zip Code
65355

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

09 / 16 / 2020

Transaction ID : A475175D67E6E45B BD9

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NEWKIRK, MARILEE, P, MS.,

Mailing Address P O BOX 544

City
WARSAW

State
MO

Zip Code
65355

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

09 / 18 / 2020

Transaction ID : AF EBC28503F354F5F9 F2

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

75.00

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

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for each category of the
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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NIERENBERG, ALAN, B, ,

Mailing Address PO BOX 743

City

COOPER LANDING

State

AK

Zip Code

99572-0743

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SHIP CONSTRUCTION STRATEGIES, INC

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY
09 / 08 / 2020

Transaction ID : A439A5FC0DE4E4B0C8D1

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRINCE, PAMELA, , ,

Mailing Address 2110 HOLLY RIDGE COURT

City

CEDAR HILL

State

TX

Zip Code

75104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
07 / 27 / 2020

Transaction ID : A4103D1EC94D44E22993

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. QUILLEN, PARKER, S, ,

Mailing Address PO BOX 22073

City

HOUSTON

State

TX

Zip Code

77227

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RETIRED

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

310.00

Date of Receipt

MM / DD / YYYY
08 / 05 / 2020

Transaction ID : A2973A11B08164B7F9FB

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

3050.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. QUILLEN, PARKER, S, ,

Mailing Address PO BOX 22073

City
HOUSTONState
TXZip Code
77227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2020

Transaction ID : A363CF35AB1E2413DBB8

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. QUILLEN, PARKER, S, ,

Mailing Address PO BOX 22073

City
HOUSTONState
TXZip Code
77227FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2020

Transaction ID : AE8066FDB29EA4066A4E

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REEVES, GLEN, , DR.,

Mailing Address 10015 W ROYAL OAK ROAD
APT 147City
SUN CITYState
AZZip Code
85351FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
PHYSICIAN CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2020

Transaction ID : A63AF5009185F480F804

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

600.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REEVES, GLEN, , DR.,

Mailing Address 10015 W ROYAL OAK ROAD
APT 147

City
SUN CITY

State
AZ

Zip Code
85351

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
PHYSICIAN CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2020

Transaction ID : A5CC1BB4877B74F7BB64

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBBINS, RAY, L, MR., JR

Mailing Address 114 SHADY VALLEY DR.

City

CHESTERFIELD

State

MO

Zip Code

63017-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 02 / 2020

Transaction ID : AF673CA3574D64AE0BD3

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBBINS, RAY, L, MR., JR

Mailing Address 114 SHADY VALLEY DR.

City

CHESTERFIELD

State

MO

Zip Code

63017-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 06 / 2020

Transaction ID : AA66214E5572C4FB6877

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

150.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBBINS, RAY, L, MR., JR

Mailing Address 114 SHADY VALLEY DR.

City
CHESTERFIELD

State
MO

Zip Code
63017-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 09 / 2020

Transaction ID : A49BF0D21E5F343B8BB1

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBBINS, RAY, L, MR., JR

Mailing Address 114 SHADY VALLEY DR.

City
CHESTERFIELD

State
MO

Zip Code
63017-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2020

Transaction ID : AD443C94A86414E9691A

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBBINS, RAY, L, MR., JR

Mailing Address 114 SHADY VALLEY DR.

City
CHESTERFIELD

State
MO

Zip Code
63017-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

590.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2020

Transaction ID : AFBDE84A38C7D4612B3D

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

75.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBBINS, RAY, L, MR., JR

Mailing Address 114 SHADY VALLEY DR.

City
CHESTERFIELD

State
MO

Zip Code
63017-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.00

Date of Receipt

08 / 06 / 2020

Transaction ID : A3076B37A1D72483B8EB

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBBINS, RAY, L, MR., JR

Mailing Address 114 SHADY VALLEY DR.

City
CHESTERFIELD

State
MO

Zip Code
63017-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

08 / 10 / 2020

Transaction ID : A97868D3DA6E6416DBAE

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBBINS, RAY, L, MR., JR

Mailing Address 114 SHADY VALLEY DR.

City
CHESTERFIELD

State
MO

Zip Code
63017-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

665.00

Date of Receipt

08 / 12 / 2020

Transaction ID : A55C11F8E74E047FCA40

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

75.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBBINS, RAY, L, MR., JR

Mailing Address 114 SHADY VALLEY DR.

City
CHESTERFIELD

State
MO

Zip Code
63017-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

715.00

Date of Receipt

08 / 18 / 2020

Transaction ID : A543936DF0D234277BC5

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBBINS, RAY, L, MR., JR

Mailing Address 114 SHADY VALLEY DR.

City
CHESTERFIELD

State
MO

Zip Code
63017-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.00

Date of Receipt

08 / 20 / 2020

Transaction ID : A842AF66074034D90806

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBBINS, RAY, L, MR., JR

Mailing Address 114 SHADY VALLEY DR.

City
CHESTERFIELD

State
MO

Zip Code
63017-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

790.00

Date of Receipt

08 / 26 / 2020

Transaction ID : A2096F2165A2044C4806

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

125.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBBINS, RAY, L, MR., JR

Mailing Address 114 SHADY VALLEY DR.

City
CHESTERFIELD

State
MO

Zip Code
63017-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

815.00

Date of Receipt

08 / 29 / 2020

Transaction ID : A6C0190C610C14A17852

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBBINS, RAY, L, MR., JR

Mailing Address 114 SHADY VALLEY DR.

City
CHESTERFIELD

State
MO

Zip Code
63017-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

09 / 05 / 2020

Transaction ID : AD2E1278A6A154B5B958

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBBINS, RAY, L, MR., JR

Mailing Address 114 SHADY VALLEY DR.

City
CHESTERFIELD

State
MO

Zip Code
63017-2626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

865.00

Date of Receipt

09 / 17 / 2020

Transaction ID : A0060B74F87484066A0F

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

75.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROVENS, DAVID, , ,

Mailing Address 306 SHEFFIELD

City
MILL VALLEY

State
CA

Zip Code
94941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2020

Transaction ID : AC86C9BB4805B45C1922

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROVENS, DAVID, , ,

Mailing Address 306 SHEFFIELD

City
MILL VALLEY

State
CA

Zip Code
94941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2020

Transaction ID : AA734D2C5FB724660B41

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROVENS, DAVID, , ,

Mailing Address 306 SHEFFIELD

City
MILL VALLEY

State
CA

Zip Code
94941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2020

Transaction ID : A0190304B38EA4CBDB31

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

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

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROVENS, DAVID, , ,

Mailing Address 306 SHEFFIELD

City
MILL VALLEY

State
CA

Zip Code
94941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

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
09 / 28 / 2020

Transaction ID : A7FC43711BE4E4155A6D

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RULAND, JOHN, M, ,

Mailing Address NORTH JUSTIN LANE

City
TUCSON

State
AZ

Zip Code
85739

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2020

Transaction ID : A372F6F0FAB0D4405B32

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RULAND, JOHN, M, ,

Mailing Address NORTH JUSTIN LANE

City
TUCSON

State
AZ

Zip Code
85739

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2020

Transaction ID : A544E445943AE4E8FB8E

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

225.00

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

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Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANFORD, BARBARA, , MS.,

Mailing Address 115 VIOLET AVENUE

City
FLORAL PARK

State
NY

Zip Code
11001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 24 / 2020

Transaction ID : A6E892A76433B42F09BA

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANFORD, BARBARA, , MS.,

Mailing Address 115 VIOLET AVENUE

City
FLORAL PARK

State
NY

Zip Code
11001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 31 / 2020

Transaction ID : A57A6E850995F4F549B4

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SANFORD, BARBARA, , MS.,

Mailing Address 115 VIOLET AVENUE

City
FLORAL PARK

State
NY

Zip Code
11001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

09 / 03 / 2020

Transaction ID : A5DB3058BED0C41EA8E2

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

100.00

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

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for each category of the
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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SANFORD, BARBARA, , MS.,

Mailing Address 115 VIOLET AVENUE

City
FLORAL PARK

State
NY

Zip Code
11001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 15 / 2020

Transaction ID : A4B0F42C5DE564ED5ACC

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SANFORD, BARBARA, , MS.,

Mailing Address 115 VIOLET AVENUE

City
FLORAL PARK

State
NY

Zip Code
11001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

09 / 30 / 2020

Transaction ID : ABC169D185AAF4CD5B2A

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHOUWEILER, JEANETTE, , MS.,

Mailing Address 2109 TURNBERRY LANE

City
FORT WAYNE

State
IN

Zip Code
46814

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 15 / 2020

Transaction ID : A7C596B4BC0374F84856

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

575.00

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHOUWEILER, JEANETTE, , MS.,

Mailing Address 2109 TURNBERRY LANE

City
FORT WAYNE

State
IN

Zip Code
46814

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2020

Transaction ID : AE8746895172E4DFD998

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SENTER, DAVID, L, MR.,

Mailing Address 71581 SW LAKE DR

City
PENDLETON

State
OR

Zip Code
97801-9577

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
08 / 29 / 2020

Transaction ID : A0ACCE662637344CABD7

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIMON, ALLEN, H, MR.,

Mailing Address 1383 N CRISS ST

City
CHANDLER

State
AZ

Zip Code
85226-1307

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

MM / DD / YYYY
07 / 10 / 2020

Transaction ID : A197E5C488AD34B17800

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

700.00

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)

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☒ 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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. SIMON, ALLEN, H, MR.,

Mailing Address 1383 N CRISS ST

City
CHANDLER

State
AZ

Zip Code
85226-1307

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2020

Transaction ID : A812983DFA9EA492A80C

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SIMON, ALLEN, H, MR.,

Mailing Address 1383 N CRISS ST

City
CHANDLER

State
AZ

Zip Code
85226-1307

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 10 / 2020

Transaction ID : AD8569BD516FE433DA90

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIMON, ALLEN, H, MR.,

Mailing Address 1383 N CRISS ST

City
CHANDLER

State
AZ

Zip Code
85226-1307

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 10 / 2020

Transaction ID : AA0AE57BDC9EB42E5B78

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

300.00

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

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

FOR LINE NUMBER: PAGE 52 OF 73

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. SWEENEY, CHARLES, J, ,

Mailing Address 810 CORONADO AVE

City
CORONADOState
CAZip Code
92118-2435FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2020

Transaction ID : A8729E9624783429C868

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SWEENEY, CHARLES, J, ,

Mailing Address 810 CORONADO AVE

City
CORONADOState
CAZip Code
92118-2435FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2020

Transaction ID : A3C85363EA35141B5832

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SWEENEY, CHARLES, J, ,

Mailing Address 810 CORONADO AVE

City
CORONADOState
CAZip Code
92118-2435FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 23 / 2020

Transaction ID : AC4D52BE7256C4133864

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

700.00

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)

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☒ 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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. TOMUTSA, LIVIU, , DR.,

Mailing Address 2510 GLEN CT

City
IRVING

State
TX

Zip Code
75062-6637

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
09 / 10 / 2020

Transaction ID : AABC63D73B0B04E58911

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALKER, TOM, , MR.,

Mailing Address 209 DAWSON STREET

City
MASON

State
OH

Zip Code
45040

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
08 / 18 / 2020

Transaction ID : ADC137FE441BA43B4BF4

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WELD, KATHLEEN, , MRS.,

Mailing Address 29 MAIN STREET

City
DOVER

State
MA

Zip Code
02030-2026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY
09 / 10 / 2020

Transaction ID : AFA726070CA314042B22

Amount of Each Receipt this Period

750.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1250.00

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 54 OF 73

☒ 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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. WETHERBEE, FRANK, , ,

Mailing Address 2214 WESTTOWN RD

City
ALBANY

State
GA

Zip Code
31721-7310

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 09 / 2020

Transaction ID : A494F48737D084B92823

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILSON, CAROL, R, MS.,

Mailing Address 2197 SUTTER VIEW LN

City
LINCOLN

State
CA

Zip Code
95648-7718

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2020

Transaction ID : ACA203C22BBDF4270AD9

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

200.00

20201.00

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

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

FOR LINE NUMBER: PAGE 55 OF 73
(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. CAMPBELL, JOHN, , ,

Mailing Address 4031 WHITLOW AVE

City
KNOXVILLE

State
TN

Zip Code
37919-7674

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 29 / 2020

Transaction ID : A06BD2B3C89384479907

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAREY ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAMPBELL, JOHN, , ,

Mailing Address 4031 WHITLOW AVE

City
KNOXVILLE

State
TN

Zip Code
37919-7674

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2020

Transaction ID : AC4118B5E08B64F65850

Amount of Each Receipt this Period

900.00

☐ Memo Item
CAREY ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PERRY, REBECCA, , ,

Mailing Address 8603 MILES RD

City
ODESSA

State
FL

Zip Code
33556-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2020

Transaction ID : A2F50981284F4408086B

Amount of Each Receipt this Period

200.00

☐ Memo Item
CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ►

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

1350.00

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

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

FOR LINE NUMBER: PAGE 56 OF 73

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. PERRY, REBECCA, , ,

Mailing Address 8603 MILES RD

City
ODESSA

State
FL

Zip Code
33556-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

09 / 16 / 2020

Transaction ID : A111E1EEC96914504AE2

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAREY ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PERRY, REBECCA, , ,

Mailing Address 8603 MILES RD

City
ODESSA

State
FL

Zip Code
33556-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

09 / 17 / 2020

Transaction ID : A10B2B9EC2D9945949FC

Amount of Each Receipt this Period

250.00

☐ Memo Item
CAREY ACCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

500.00

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

1850.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 73

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	0		

FEC Identification Number

C**Transaction ID : B61F87B33E**

Amount of Each Disbursement this Period

1564.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address 3 DUPONT CIRCLE, NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	7			2	0	2	0		

FEC Identification Number

C**Transaction ID : BB4A49B04B**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BANK OF AMERICA

Mailing Address 3 DUPONT CIRCLE, NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	7			2	0	2	0		

FEC Identification Number

C**Transaction ID : B2D7B44F19**

Amount of Each Disbursement this Period

15.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1594.26

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 73

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

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

NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name (Last, First, Middle Initial)

A. BANK OF AMERICA

Mailing Address 3 DUPONT CIRCLE, NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2020

FEC Identification Number

C**Transaction ID : BEF16A81ED**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BOOST MOBILE

Mailing Address 9060 IRVINE CENTER DR

City
IRVINEState
CAZip Code
92618-4645Purpose of Disbursement
TELEPHONE SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		13		2020

FEC Identification Number

C**Transaction ID : B9ED3FB5D8**

Amount of Each Disbursement this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BOOST MOBILE

Mailing Address 9060 IRVINE CENTER DR

City
IRVINEState
CAZip Code
92618-4645Purpose of Disbursement
TELEPHONE SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		28		2020

FEC Identification Number

C**Transaction ID : B7D6F1987F**

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 73

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

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

NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name (Last, First, Middle Initial)

A. BOOST MOBILE

Mailing Address 9060 IRVINE CENTER DR

City
IRVINEState
CAZip Code
92618-4645Purpose of Disbursement
TELEPHONE SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2020

FEC Identification Number

C**Transaction ID : B3B4016250E**

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BOOST MOBILE

Mailing Address 9060 IRVINE CENTER DR

City
IRVINEState
CAZip Code
92618-4645Purpose of Disbursement
TELEPHONE SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		28		2020

FEC Identification Number

C**Transaction ID : B2B7FA152B**

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL MEDIA GROUP, LLCMailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
PAC MANAGEMENT CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		03		2020

FEC Identification Number

C**Transaction ID : B3A42DC564**

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

120.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 73

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

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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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2020

Mailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
PAC MANAGEMENT CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : BF32BFAFAE**

Amount of Each Disbursement this Period

1800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL MEDIA GROUP, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		16		2020

Mailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
PAC MANAGEMENT CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : B7CC96B159I**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL MEDIA GROUP, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		23		2020

Mailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
PAC MANAGEMENT CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : B63008A1EA**

Amount of Each Disbursement this Period

1200.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 73

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

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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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2020

Mailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
PAC MANAGEMENT CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : B12246E01B**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL MEDIA GROUP, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2020

Mailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
PAC MANAGEMENT CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : B5FA2C714C**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL MEDIA GROUP, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2020

Mailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
PAC MANAGEMENT CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : BAB51503B9**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 73

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

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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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2020

Mailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
PAC MANAGEMENT CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : B763788E320**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL MEDIA GROUP, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2020

Mailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
PAC MANAGEMENT CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : B96E4B6C611**

Amount of Each Disbursement this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL MEDIA GROUP, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		03		2020

Mailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
PAC MANAGEMENT CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : B925E90E12**

Amount of Each Disbursement this Period

1650.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3900.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 73

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

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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
WALTHAMState
MAZip Code
02451Purpose of Disbursement
EMAIL SERVICE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		13		2020

FEC Identification Number

C**Transaction ID : BD893C9397I**

Amount of Each Disbursement this Period

238.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CONSTANT CONTACT

Mailing Address 1601 TRAPELO ROAD, SUITE 329

City
WALTHAMState
MAZip Code
02451Purpose of Disbursement
EMAIL SERVICE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		12		2020

FEC Identification Number

C**Transaction ID : B22B19DE18I**

Amount of Each Disbursement this Period

238.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONSTANT CONTACT

Mailing Address 1601 TRAPELO ROAD, SUITE 329

City
WALTHAMState
MAZip Code
02451Purpose of Disbursement
EMAIL SERVICE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2020

FEC Identification Number

C**Transaction ID : B0EC3AC91I**

Amount of Each Disbursement this Period

238.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

715.50

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 64 OF 73

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name (Last, First, Middle Initial)

A. GODADDY.COM

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2020

Mailing Address 14455 N HAYDEN RD
STE 226City
SCOTTSDALEState
AZZip Code
85260Purpose of Disbursement
WEBSITE SERVICE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : B6D9D47AFA

Amount of Each Disbursement this Period

22.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE UPS STORE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2020

Mailing Address 2100 M ST NW, STE 170

City
WASHINGTONState
DCZip Code
20037Purpose of Disbursement
MAIL SERVICES/SHIPPING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : B8D83CAE4F

Amount of Each Disbursement this Period

274.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE UPS STORE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2020

Mailing Address 2100 M ST NW, STE 170

City
WASHINGTONState
DCZip Code
20037Purpose of Disbursement
MAIL SERVICES/SHIPPING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : BBDA325AB

Amount of Each Disbursement this Period

24.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

320.23

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 73

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

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NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

Full Name (Last, First, Middle Initial)

A. WALL STREET JOURNALMailing Address 1350 BROADWAY
SUITE 2400City
NEW YORKState
NYZip Code
10018Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2020

FEC Identification Number

C**Transaction ID : B031DBE2D4**

Amount of Each Disbursement this Period

53.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WALL STREET JOURNALMailing Address 1350 BROADWAY
SUITE 2400City
NEW YORKState
NYZip Code
10018Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2020

FEC Identification Number

C**Transaction ID : B157A9CA31:**

Amount of Each Disbursement this Period

53.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WALL STREET JOURNALMailing Address 1350 BROADWAY
SUITE 2400City
NEW YORKState
NYZip Code
10018Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2020

FEC Identification Number

C**Transaction ID : BEB38E40D2**

Amount of Each Disbursement this Period

53.15

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

159.45

15414.44

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 73

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input 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. BANK OF AMERICA

Mailing Address 3 DUPONT CIRCLE, NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
CAREY ACCOUNT: BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2020

FEC Identification Number

C**Transaction ID : BF11D4607C**

Amount of Each Disbursement this Period

16.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address 3 DUPONT CIRCLE, NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
CAREY ACCOUNT: BANK FEE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2020

FEC Identification Number

C**Transaction ID : B788DB981C**

Amount of Each Disbursement this Period

16.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL MEDIA GROUP, LLCMailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
CAREY ACCOUNT: PAC MANAGEMENT CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		03		2020

FEC Identification Number

C**Transaction ID : B0DF63056E**

Amount of Each Disbursement this Period

300.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

332.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 73

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input 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. CAPITOL MEDIA GROUP, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2020

Mailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
CAREY ACCOUNT: PAC MANAGEMENT CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : B4D9BC72E8

Amount of Each Disbursement this Period

 200.00☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL MEDIA GROUP, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		16		2020

Mailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
CAREY ACCOUNT: PAC MANAGEMENT CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : B3A766BE04I

Amount of Each Disbursement this Period

 200.00☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL MEDIA GROUP, LLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2020

Mailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
CAREY ACCOUNT: PAC MANAGEMENT CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : BDD3F83276

Amount of Each Disbursement this Period

 500.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ► 900.00**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 73

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input 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. CAPITOL MEDIA GROUP, LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	2	0		

Mailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
CAREY ACCOUNT: PAC MANAGEMENT CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : BD9B3D4544**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL MEDIA GROUP, LLC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	3			2	0	2	0		

Mailing Address 2021 L ST NW
SUITE 101-340City
WASHINGTONState
DCZip Code
20036-4909Purpose of Disbursement
CAREY ACCOUNT: PAC MANAGEMENT CONSULTING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : B134024F4FC**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PAYPAL

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	2	0		

Mailing Address 2211 NORTH FIRST ST

City
SAN JOSEState
CAZip Code
95131Purpose of Disbursement
CAREY ACCOUNT: CREDIT CARD PROCESSING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : B32CFC4BE;**

Amount of Each Disbursement this Period

258.17

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1758.17

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 73

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input 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 TECHNOLOGIESMailing Address 1455 MARKET STREET
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
CAREY ACCOUNT: TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2020

FEC Identification Number

C**Transaction ID : BB78F70EDD**

Amount of Each Disbursement this Period

3.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIESMailing Address 1455 MARKET STREET
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
CAREY ACCOUNT: TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2020

FEC Identification Number

C**Transaction ID : B5ABC8F3AC**

Amount of Each Disbursement this Period

21.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
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FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

24.98

3015.15

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

A. 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

LEESBURG

State

VA

Zip Code

20176

Outstanding Balance Beginning This Period

840.00

Transaction ID : D9C0B70D8209542CC9DC

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

840.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CAPITOL MEDIA GROUP, LLC

Nature of Debt (Purpose):

PAC MANAGEMENT CONSULTING

Mailing Address 2021 L ST NW

SUITE 101-340

City

WASHINGTON

State

DC

Zip Code

20036-4909

Outstanding Balance Beginning This Period

1650.00

Transaction ID : DCC6AC9B9D48848F9ABA

Amount Incurred This Period

0.00

Payment This Period

1650.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CAPITOL MEDIA GROUP, LLC

Nature of Debt (Purpose):

PAC MANAGEMENT CONSULTING

Mailing Address 2021 L ST NW

SUITE 101-340

City

WASHINGTON

State

DC

Zip Code

20036-4909

Outstanding Balance Beginning This Period

0.00

Transaction ID : D844FB34F477C43F59EE

Amount Incurred This Period

1500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

2340.00

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)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DB CAPITOL STRATEGIES PLLCNature of Debt (Purpose):
PAC LEGAL FEES

Mailing Address 717 KING ST, STE 300

City
ALEXANDRIAState
VAZip Code
22314

Outstanding Balance Beginning This Period

2000.00

Transaction ID : DFBEEC2F084A641DA905

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

KOCH & HOOS, LLCNature of Debt (Purpose):
PAC ACCOUNTING CONSULTING

Mailing Address P.O. BOX 1154

City
ALEXANDRIAState
VAZip Code
22313-1154

Outstanding Balance Beginning This Period

21564.60

Transaction ID : DB6C379F8530A4FA9912

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

21564.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LEXISNEXISNature of Debt (Purpose):
PAC SUBSCRIPTION

Mailing Address P.O. BOX 7247-7090

City
PHILADELPHIAState
PAZip Code
19170

Outstanding Balance Beginning This Period

1356.80

Transaction ID : D0121370A31684390970

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1356.80

1) **SUBTOTALS** This Period This Page (optional)..... ►

24921.40

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)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MAELSTROM TECHNOLOGIES SOLUTIONS

Nature of Debt (Purpose):

PAC CREDIT CARD PROCESSING

Mailing Address PO BOX 44

City
SUSSEXState
WIZip Code
53089-0044

Outstanding Balance Beginning This Period

240.00

Transaction ID : D5C95E0A1195241F7A37

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

240.00

B. 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
NEW YORKState
NYZip Code
10087-5897

Outstanding Balance Beginning This Period

1722.50

Transaction ID : DD6F3BF0120F847BBADA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1722.50

C. 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
BROOKFIELDState
WIZip Code
53005-6035

Outstanding Balance Beginning This Period

750.15

Transaction ID : D42583FA7204D4613A60

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

750.15

1) **SUBTOTALS** This Period This Page (optional)..... ►

2712.65

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)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

THE NATIONAL REPUBLICAN TRUST PAC

A. 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

ALEXANDRIA

State

VA

Zip Code

22313-5574

Outstanding Balance Beginning This Period

520.00

Transaction ID : D5F263575A27941F2943

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

520.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

520.00

2) **TOTALS** This Period (last page this line number only)..... ►

30494.05

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) ►

30494.05