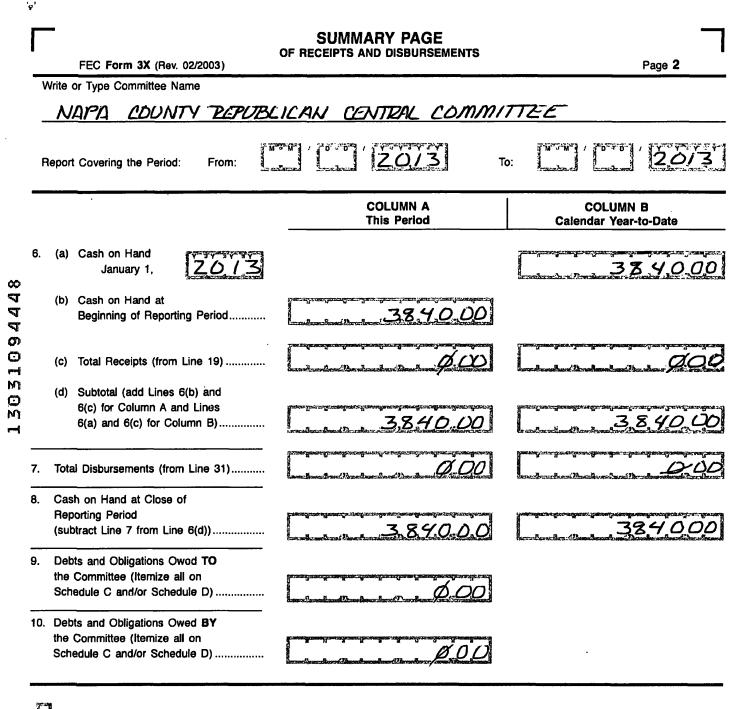
į		PORT OF RECEIPTS DISBURSEMENTS her Than An Authorized Committee 2013 JUL 22 PM 1: 39
	1. NAME OF TYPE O COMMITTEE (in full)	DR PRINT ▼ Example: If typing, type over the lines.
	NAPA COUNTY RE	PUBLICAN CENTRAL COMMITTEE
	ADDRESS (number and street)	0, 730X 3263
447	Check if different than previously reported. (ACC)	APA KA KA KA A A A A A A A A A A A A
99	2. FEC IDENTIFICATION NUMBER	▼ CITY ▲ STATE ▲ ZIP CODE ▲
30310	CD0455659	3. IS THIS NEW AMENDED REPORT (N) OR (A)
end	4. TYPE OF REPORT (b) N (Choose One) F	PRE-Election Report for the: Convention (12C) Election an
	I certify that I have examined this Report Type or Print Name of Treasurer	t and to the best of my knowledge and belief it is true, correct and complete.
		eph Blednis Date 07 14 2013
	Office Use Only	incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. FEC FORM 3X Rev. 12/2004



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

Γ	E FEC Form 3X (Rev. 06/2004)	DETAILED SUMMARY PAGE of Receipts	Page 3
W	rite or Type Committee Name		
•••			CARM ITTEE
		<u>LTBLICHN CCNTRAL (</u>	
Re	port Covering the Period: From:		0: 2013
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	<u>, 8.00</u>	Linn Doo
	(ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)▶	e.oo	
	 (b) Political Party Committees (c) Other Political Committees (such as PACs) 	<u> </u>	HOO MOD
12.	 (d) Total Contributions (add Lines 11(a)(iiii), (b), and (c)) (Carry Totals to Line 33, page 5)	<u><u> </u></u>	000
13.	All Loans Received	<u>Ø.00</u>	<u> 1.00</u>
15.	Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.)	<u> </u>	
16.	(Carry Totals to Line 37, page 5) Refunds of Contributions Made to Federal Candidates and Other	Ø.D.O	B.CO.
17. (Political Committees Other Federal Receipts (Dividends, Interest, etc.)		<u> </u>
18.	Transfers from Non-Federal and Levin Funds (a) Non-Federal Account		
	(from Schedule H3)(b) Levin Funds (from Schedule H5)	RN)	A W
	(c) Total Transfers (add 18(a) and 18(b))	Line DO	Lini 600
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	B-DO	<u> </u>
	subtract Line 18(c) from Line 19)►	1. 1. 1. 1. <u>1. 0.00</u>	anna (20,00)

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DETAILED SUMMARY PAGE

of Disbursements

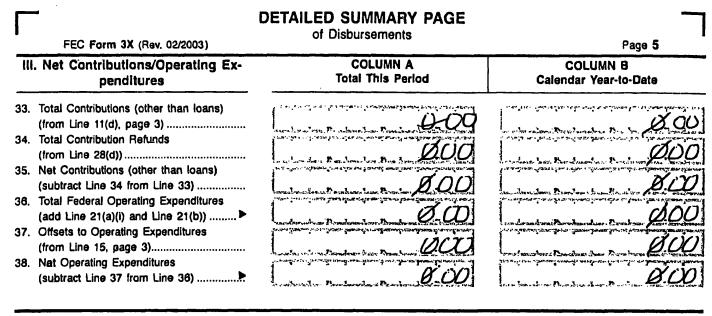
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SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 6 OF 15	
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	for commercial purposes, other than using the r			
Λ	NAME OF COMMITTEE (In Full)			
1/	NAPA COUNTY REP	TRIN	AN CENTRAL C	OMMITTEE
K	Full Name (Last, First, Middle Initial)			
Α.		- <u>.</u>		Date of Receipt
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SCHEDULE B (FEC Form 3X)		FOR LINE							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only 21b							
	Detailed Summary Page	27	28a 28b 28c 29 30b						
Any information copied from such Reports and Stater or for commercial purposes, other than using the nam	ments may not be sold or us ne and address of any politic	ed by any pers cal committee k	on for the purpose of soliciting contributions a solicit.contributions from such committee.						
NAME OF COMMITTEE (In Full)									
Full Name (Last, First, Middle Initial)	LICAN CENT	RAL CO	MMITTEE						
A.									
Mailing Address	Mailing Address								
City	State Zip Code		I traditional demonstrated brandscarding transformed						
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		and a straight of the straight	Amount of Each Disbursement this Period						
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President	Other (specify)								
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B.	łn		Date of Disbursement						
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	Primary General Other (specify)								
State: District:	····· (
Full Name (Last, First, Middle Initial) C.			Date of Disbursement						
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Office Sought: House Disbursen	Pent For:	Category/ Type	are stand our Block for a Russian ar Descharter						
Senate	Primary General		\mathbf{X}						
State: District:	Other (specify)		\mathbf{X}						
SUBTOTAL of Disbursements This Page (optional)		••••••••••	we where the Bar base does Bearing a subscription						
TOTAL This Period (last page this like number only).		••••••	BOD						

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SCHEDULE C (FEC Form 3X) LOANS

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LOANS		for	Use separate schedule(s) PAGE C OF C for each category of the Detailed Summary Page FOR LINE 13 OF FORM		
NAME OF COMMITTEE (In Fu			and Junnary Fage		
NAME OF COMMITTEE (IN FO		BLICAN CE	NTER, CO.	MITTEE	
COAN SOURCE Full Nam	e (Last, First, Middle Initi	al)		Election: Primary General	
Mailing Address				Other (specify) 🔻	
City	State	ZIP Code			
Original Amount of Loan	undranter for a close of the second	lative Payment To Date magnetic constraints and second second market second	Surveyor and have been	ce Outstanding at Close of This Period	
			Interest Rate	Secured:	
Longendana anti-	enterent constant	anantamika (anantamantama	Arrow Anno Star and Star and Star	% (apr) Yes No	
List All Endorsers or Gua			of Employer		
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Mailing Address		Occut			
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2. Full Name (Last, First, M	Aiddle Initial)	Outsta Name	of Employer		
Mailing Address		Occur	pation		
City	State ZIP C		nteed	ระหายของการใหม่ง เริ่มการรับคามรับคามสายารระวิจากเห	
3. Full Name (Last, First, M	liddle Initial)	Name	a Employer		
Mailing Address		Оссир	ation		
City	State ZIP C	Code Guara Outsta	nteed	nen grannangen negen kan general seren der son	
4. Full Name (Last, First, N	liddle Initial)	Name	of Employer	.\	
Mailing Address	·····	Occup	ation		
City	State ZIP C	Code Guara Outsta	nteed	nan gunta yana da ana gunta yana da ana d	
SUBTOTALS This Period This	Page (optional)				
TOTALS This Period (last pag	e in this line only)			chorner & Borner & Server & Borner & served and states and served	
Carry outstanding balance on	ly to LINE 3, Schedule D,	for this line. If no Sche	dule D, carry forward	d to appropriate line of Summary.	

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	EDULE C–1 (FEC Form 3X)		Supplementary for
1 OA	NS AND LINES OF CREDIT FROM L	ENDING INSTITUTION	
			Page of Schedul
	I Election Commission, Washington, D.C. 20463		
NAME	E OF COMMITTEE (In Full)	•	FEC IDENTIFICATION NUME
			C00455659
N	APA COUNTY REPUBLICAN C	CENTRAL COMMIT	TEE 100 / 2 Jag (
	ING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)
FOUN	ame	Lawson de restande de la construction de la constru	
	\mathbf{X} \mathbf{x}	Sumhursdaue Baudensedaue Baudens	
Mailing	g Adverss		
1		Date Incurred or Establishe	d land land
	State 7th Orde	-	- INTRI , FOTO , FARADA
City	State Zip Code	Date Due	مسعسعا اسعسا
L			
A.	Has loan been restructured? 🔲 No 🔛 Yes	if yes, date originally incurr	be
8.	If line of credit,	Total	
	Amount of this Draw:	Outstanding Balance:	
			iterations and a second se
C.	Are other parties secondarily liable for the debt incur	•	
.		nust be reported on Schedule C	
D.	Are any of the following pledged as collateral for the property, grods, negotiable instruments, certificates o stocks, accounts receivable, cash on deposit, or other	loan: real estate, personal I deposit, chattel papers, Ir similar traditional collateral?	What is the value of this collateral?
	No Yes if yes, specify:		I was a set of the set
· /			Does the lender have a perfected sec
-	Are any future contributions or tuture receipts of inter		interest in it? No Yes
E	collateral for the loan? No Yes If yes,		What is the estimated value?
	A depository account must be established pursuant	Location of account:	
	td 11 CFR 100.82(e)(2) and 100.142(e)(2).	Address:	
	Date account established:		
		City, State, Zip:	a production of the second second
ि ह	If neither of the types of collateral described above wa	as pledged for this loan, only the	amount pledged does not equal or exce
	the loan amount, state the basis upon which this loan	n was made and the basis on w	hich it assures repayment.
	COMMITTEE TREASURER		DATE
. <u>a</u> .			
G.	Typed Name	: 	معمدينا المعقا العكرا
G.	Signature	•	
	Signature	•	
G. H.	Signature Attach a signed copy of the loan agreement.		
	Signature Attach a signed copy of the loan agreement. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the te		mation regarding the extension of the loa
	Signature Attach a signed copy of the loan agreement. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the to are accurate as stated above: II. The ban was made on terms and conditions (in	erms of the loan and other infor	
	Signature Attach a signed copy of the loan agreement. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the te are accurate as stated above. II. The ban was made on terms and conditions (in similar extensions of credit to other borrowers of	erms of the loan and other infor icluding interest rate) no more fa f comparable credit worthiness.	avorable at the time than hose imposed
	Signature Attach a signed copy of the loan agreement. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the te are accurate as stated above: II. The ban was made on terms and conditions (in similar extensions of credit to other borrowers of III. This institution is aware of the requirement that	erms of the loan and other infor cluding interest rate) no more fa f comparable credit worthiness. a loan must be made on a bas	avorable at the time than those imposed is which assures repayment, and has
<u>Н.</u> В	Signature Attach a signed copy of the loan agreement. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the to are accurate as stated above: II. The ban was made on terms and conditions (in similar extensions of credit to other borrowers of	erms of the loan and other infor cluding interest rate) no more fa f comparable credit worthiness. a loan must be made on a bas	avorable at the time than those imposed is which assures repayment, and has ing this loan.
H. E	Signature Attach a signed copy of the loan agreement. TO BE SIGNED BY THE LENDING INSTITUTION: 1. To the best of this institution's knowledge, the te are accurate as stated above: II. The loan was made on terms and conditions (in similar extensions of credit to other borrowers of III. This institution is aware of the requirement that complied with the requirements set forth at 11 C ORIZED REPRESENTATIVE I Name	erms of the loan and other infor cluding interest rate) no more fa f comparable credit worthiness. a loan must be made on a bas	avorable at the time than those imposed is which assures repayment, and has

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FEC Schedule C-1 (Form 3X) Rev. 02/2003

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SCHEDULE D (FEC Form 3X)		(Use separate	PAGE 10 OF 15			
DEBTS AND OBLIGATIONS	schedule(s)	FOR LINE NUMBER:				
Excluding Loans	for each numbered line)	(check only one) 9				
NAME OF COMMITTEE (In Full)		.				
	AN CENTRAL .					
A. Full Name (Last, First, Middle Initial) of Debtor o	r Creditor	Nature of C	Debt (Purpose):			
Mailing Address						
City Glate	Zip Code					
Outstanding Balance Beginning This Period		_				
here a frank from the second						
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period			
	าร์ : เฉขาร์สาของกร้อง รามห์ใจสมอกใจอาหารใหญาเหลือของหร่วงสาขนต์ไ		และ รุงมหารุงมหารุงมาร 70 เพราะมีราย เป็นสมบรรรมสาย			
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B. Full Name (Last, First, Middle Initial) of Debtor or	Creditor	Nature of D	ebt (Purpose):			
Mailing Address						
City State	Zip Code					
	<u>\</u>					
Outstanding Balance Beginning This Period	V6					
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Amount incurred This Period	Payment This Period		ng Balance at Close of This Period			
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C. Full Name (Last, First, Middle Initial) of Debtor o			ebt (Purpose):			
Mailing Address		x				
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City	State Zip Code					
Outstanding Balance Beginning This Period						
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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 on		ne Barren Brennen Barren Brenne Brenne Convertigener			

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FEC Schedule D (Form 3X) Rev. 02/2003

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

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ITEMIZED INDEPENDENT EXPENDITURES	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	
NAPA COUNTY REPUBLICAN CENTRAL COMM.	C00455659
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Full Name (Last, First, Middle Initiäl) of Payee Date)
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Mailing Address Arno	ansteinet Iounium turstumiumut
City State Zip Code	
Purpose of Expenditure Category/	ight: House State:
Туре	Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure: Check Ond	
Calendar Year-To-Date Per Election Disbursem	ent For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Date	
Mailing Address Amo	and southernal so
City State Fip Code	<u></u>
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Purpose of Expenditure Category Type	ght: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Check One	
Calendar Year-To-Date Per Election	ent For: Primary General Other (specify)
	ามารักการการรักการรักการรักการรักการรักการรักการรัก
(a) SUBTOTAL of Itemized Independent Expenditures	- desiliendesiliendesi
(b) SUBTOTAL of Uniternized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expanditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	cooperation, consultation, or concert i the reporting entity is not a political
Date Date	المعمدين المعميا العميا
Signature	landered burgeture to a land

FEC Schedule E (Form 3X) Rev. 07/2011

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CHEDULE F (FEC Form 3	•					
EMIZED COORDINATED PAP						
OLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)						
U.S.C. §441a(d)) (To	be used only	by Political Comm	littees in the Gen	eral Election)	FOR LINE 25 OF	FORM 3X
AME OF COMMITTEE (In Full)					<u></u>	
NADA COUNTY	REPU	BLICAN	CENTRA	L COM	NITTEE	
as your committee been designated to m pordinated expenditures by a political part		Full Name of Subo	rdinate Committee			
	y committee					
YES, name the designating committee:		Mailing Address				
		City	• • • • • • • • • • • • • • • • • • • •	Sta	te ZIP Code	
Full Name (Last, First, Middle Initial) of	f Each Pavee			Purpose of Exp	enditure	
Malling Address						Category/ Type
	State	7la Cada		Date Yurrin / T		
City		Zip Code				
Name of Federal Candidate Supported	Office Sough	nt: House Senate	State:	Amount		
		Presidentiai			andress from the second se	· ·]
Aggregate General Election	พระอวุทระหญ่งเหตุกรูเลง 1	hanna an	- Carlor and a carlo	ADD IN NO WOMELS O	α τη διαγολογία το ματική τη διαγοριατική το ματική το πραγοριατική το πραγοριατική το πραγοριατική το πραγορι Τα τη διαγοριατική το πραγοριατική το πραγοριατική το πραγοριατική το πραγοριατική το πραγοριατική το πραγοριατι	and fit was at it with a distribution of
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		<u>.</u>		-		Category/
Mailing Address	X	Kr		Date		Туре
City	State	Zip Code			9.1.9.1 \ <u> </u> .4.4.4.8.4	
Name of Federal Candidate Supported	Office Sough		State:	Amount	การเรียนการใน เป็นสมานสำนักสุดที่สุด	
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Aggregate General Election	รางราช ระการราชการราชการราชการราช -	an a	friend .	fanne a transmitterante Da	radaractions Pricetonorton	. Toravisoraal
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Mailing Address						Туре
City	State	Zip Code		Date I		<u>ل</u> مد
Name of Federal Candidate Supported	Office Sough	t: House	State:	- Innuine - L	william line abused	
		Senate	District:	Amount		
Aggregate General Election		Presidential			and an and the state of the second	and
Expenditure for this Candidate	: aufa yaar lawa . Proved	ann den e Bren berne berne fi				
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OTAL. This Period (last page this line nut	mber only)				······································	∇
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FEC Schedule F (Form 3X) Rev. 02/2009

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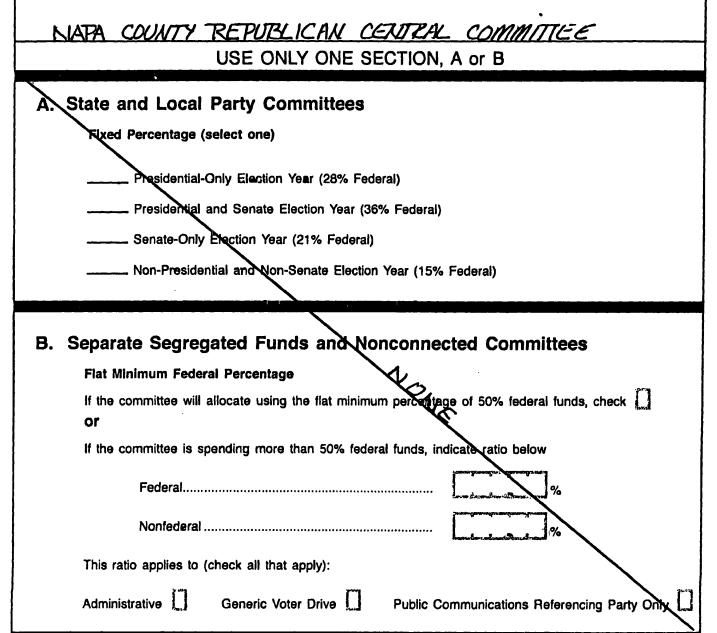
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SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

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

NAME OF COMMITTEE (In Full)



SCHEDULE H2 (FEC Form 3X)						
ALLOCATION RATIOS.		PAGE OF 15				
NAME OF COMMITTEE (In Full)						
NAPA COUNTY PEPUBLICAN CENTR	TAL COMMIT	TEE				
RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDA ACTIVITIES APPEARING ON THIS REPORT.						
Methods of allocation:						
 FUNDRAISING activities are allocated using the "funds received met expenses must equal the federal proportion of monies raised. 	thod" where the federal pro	oportion of				
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated acceleration where the federal proportion of disbursements is based on the benefitivity. For PACS Only: Direct candidate support includee public commission and nonfederal candidates, regardless of whether there is a sare allocated using a time/space method.	fit derived by federal candi nunications or voter drives	dates from the ac- that refer to both				
CTIVITY OR EVENT IDENTIFIER						
ACTIVITY IS:	FEDERAL %	NONFEDERAL %				
CHECK IF THE RATIO IS:	%	man descendence in the second				
ACTIVITY OR EVENT IDENTIFIER						
	FEDERAL %	NONFEDERAL %				
ACTIVITY IS:	Januar Saraha Sarahan an Gam-24					
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	FEDERAL %	NONFEDERAL %				
Fundraising Direct Candidate Support	%	%				
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New Revised Same as Previously Reported						
ACTIVITY OR EVENT IDENTIFIER		NONFEDERAL %				
ACTIVITY IS:	FEDERAL %					
Fundraising Direct Candidate Support	%	%				
CHECK IF THE RATIO IS:						
New Revised Same as Previously Reported						
ACTIVITY OR EVENT IDENTIFIER						
ACTIVITY IS:	FEDERAL %	NONFEDERAL %				
Fundraising Direct Candidate Support	%	%				
CHECK IF THE RATIO IS:	Incientinitador 10	week methodane				
New Revised Same as Previously Reported						
ACTIVITY OR EVENT IDENTIFIER						
	FEDERAL %	NONFEDERAL %				
ACTIVITY IS:						
CHECK IF THE RATIO IS:	Marken %					
New Revised Same as Previously Reported						

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

		FOR LINE 18a OF FORM 3X				
NAME OF COMMITTEE (In Full)						
NAPA COUNTY REPUTSIJC		MMITTEE.				
NAME OF ACCOUNT		TOTAL AMOUNT TRANSFERRED				
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II) Generic Voter Drive		รัฐแระเรื่อ อุณารี เราะ ค.ริ. ราชเหรียญการใหญ่ ครั้งการกร้างความสาวารกระสาวารกระสาวารกระสาวารกระสาวารกระสาวารก				
		Seven Bener Seven Denne berer bere Danne der er kom den sollen einer				
ili) Exempt Activities		aunderschum Rose Somelers Broch works - Rosedound				
iv) Direct Fundralsing (List Activity or Event Ident	ifier)					
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a)	and market Barrierandors, Press and markets and					
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b)	l meentamaharat Dinari sersetarat Para termhanat Paantaa	ร้างระหน่านกรรมหน้าน พ.ว.้านสมาครั้นสมาครั้งระการการการการการการการการการการการการการก				
c) Total Amount Transferred For Direct Foodrais	lng					
v) Direct Candidate Support (List Activity or Eve		anna an haonna an an an anna anna anna a				
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