

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

National Federation of Republican Women PAC (NFRW PAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9955.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="8660.00"/>	<input type="text" value="18615.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="18615.00"/>	<input type="text" value="18615.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2010.00"/>	<input type="text" value="2010.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="16605.00"/>	<input type="text" value="16605.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

Write or Type Committee Name

National Federation of Republican Women PAC (NFRW PAC)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7500.00	16000.00
(ii) Unitemized	1160.00	2615.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	8660.00	18615.00
(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)	8660.00	18615.00
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	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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))..... ▶	8660.00	18615.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	8660.00	18615.00

DETAILED SUMMARY PAGE

of Disbursements

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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	1510.00	1510.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1510.00	1510.00
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 (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	500.00	500.00
(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)).....	500.00	500.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2010.00	2010.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2010.00	2010.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	8660.00	18615.00
34. Total Contribution Refunds (from Line 28(d))	500.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8160.00	18115.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1510.00	1510.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1510.00	1510.00

**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 6 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
National Federation of Republican Women PAC (NFRW PAC)

A. Carrie L Almond
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 255
 City Chillicothe State MO Zip Code 64601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Citizens Bank & Trust Occupation Banker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **07 / 19 / 2014**
Transaction ID : SA11AI.4160
 Amount of Each Receipt this Period **1000.00**

B. Reta J. Hamilton
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 5423
 City Bella Vista State AR Zip Code 72714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **08 / 21 / 2014**
Transaction ID : SA11AI.4196
 Amount of Each Receipt this Period **500.00**

C. Carolyn King Hodges
 Full Name (Last, First, Middle Initial)
 Mailing Address 5525 Navarro St.
 City Houston State TX Zip Code 77056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hodges Southwest Occupation President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **09 / 15 / 2014**
Transaction ID : SA11AI.4209
 Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional)..... **1750.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 9
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Federation of Republican Women PAC (NFRW PAC)

A. Theresa W Kosmoski
 Full Name (Last, First, Middle Initial)
 Mailing Address 8855 Merlin Ct
 City Houston State TX Zip Code 77055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2014
Transaction ID : SA11AI.4158
 Amount of Each Receipt this Period
 500.00

B. Jeanne C. Luckey
 Full Name (Last, First, Middle Initial)
 Mailing Address 2111 Bienville Blvd
 City Ocean Springs State MS Zip Code 39564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Homemaker
 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 / 04 / 2014
Transaction ID : SA11AI.4188
 Amount of Each Receipt this Period
 250.00

C. Betty Sheppard Poe
 Full Name (Last, First, Middle Initial)
 Mailing Address 3000 Crescent Ave
 City Greenville State SC Zip Code 29605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2014
Transaction ID : SA11AI.4152
 Amount of Each Receipt this Period
 5000.00
 Earmarked Contribution - Themis PAC

SUBTOTAL of Receipts This Page (optional).....▶	5750.00
TOTAL This Period (last page this line number only).....▶	7500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Federation of Republican Women PAC (NFRW PAC)

Full Name (Last, First, Middle Initial)

A. Election CFO LLC

Mailing Address PO Box 26141

City Alexandria State VA Zip Code 22313

Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	1	4

Transaction ID : SB21B.4212

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. Election CFO LLC

Mailing Address PO Box 26141

City Alexandria State VA Zip Code 22313

Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	1	4

Transaction ID : SB21B.4215

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

C. Election CFO LLC

Mailing Address PO Box 26141

City Alexandria State VA Zip Code 22313

Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

Transaction ID : SB21B.4216

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1	5	0	0	0	0	0	0	0	0
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1	5	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)
National Federation of Republican Women PAC (NFRW PAC)

Full Name (Last, First, Middle Initial)

A. Reta J. Hamilton

Mailing Address PO Box 5423

City State Zip Code
Bella Vista AR 72714

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
07 07 2014

Transaction ID : SB28A.4218

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

500.00

500.00