

# 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.

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 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  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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

Type or Print Name of Treasurer Natalie Baur

Signature of Treasurer Natalie Baur [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Promoting Our Republican Team 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="2013"/>		<input type="text" value="329748.38"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="329748.38"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="93186.7"/>	<input type="text" value="93186.7"/>
(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="422935.08"/>	<input type="text" value="422935.08"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="122422.13"/>	<input type="text" value="122422.13"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="300512.95"/>	<input type="text" value="300512.95"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Promoting Our Republican Team 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).....	2500	2500
(ii) Unitemized .....	0	0
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2500	2500
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	77000	77000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	79500	79500
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received .....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	1186.7	1186.7
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	12500	12500
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5) .....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	93186.7	93186.7
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	93186.7	93186.7

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	66222.13	66222.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	66222.13	66222.13
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	56200	56200
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements .....	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	122422.13	122422.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	122422.13	122422.13

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	79500	79500
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	79500	79500
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	66222.13	66222.13
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1186.7	1186.7
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	65035.43	65035.43

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

Form/Schedule: F3XA  
Transaction ID :

This amendment serves to correct aggregate totals and cash on hand which were off due to prior amended reports.

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 32  
(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)  
**Promoting Our Republican Team PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Diane M Macpherson Major**

Mailing Address 2232 Westwood Place

City Falls Church      State VA      Zip Code 22043-1619

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

Name of Employer: **VH Strategies**      Occupation: **Lobbyist**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500**

Date of Receipt  
**03 / 16 / 2013**

**Transaction ID : 1423-2211-c**

Amount of Each Receipt this Period  
**2500**

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

Mailing Address

City      State      Zip Code

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

Name of Employer      Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City      State      Zip Code

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

Name of Employer      Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>2500.00</b>

**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 8 OF 32
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)  
**A. American College of Radiology Association PAC**

Mailing Address 1891 Preston White Drive

City Reston	State VA	Zip Code 20191-4326
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00343459

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	25	/	2013

**Transaction ID : 1409-2173-c**

Amount of Each Receipt this Period  
1000

Full Name (Last, First, Middle Initial)  
**B. Abbott Laboratories Employee Political Action Committee**

Mailing Address 100 Abbott Park Road

City Abbott Park	State IL	Zip Code 60064-3502
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040279

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2013

**Transaction ID : 753-2176-c**

Amount of Each Receipt this Period  
1000

Full Name (Last, First, Middle Initial)  
**C. American Society of Pension Professionals & Actuaries PAC**

Mailing Address 4245 Fairfax Drive  
Suite 750

City Arlington	State VA	Zip Code 22203-1648
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00333104

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2013

**Transaction ID : 524-2196-c**

Amount of Each Receipt this Period  
5000

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<b>TOTAL</b> 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 9 OF 32
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial) <b>A. Biogen Political Action Committee PAC</b>		Date of Receipt MM / DD / YYYY 02 / 19 / 2013 <b>Transaction ID : 1418-2195-c</b>
Mailing Address 133 Boston Post Road		Amount of Each Receipt this Period 5000
City Weston	State MA	Zip Code 02493-2525
FEC ID number of contributing federal political committee. C C00390351	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000	

Full Name (Last, First, Middle Initial) <b>B. Dominion Political Action Committee</b>		Date of Receipt MM / DD / YYYY 03 / 01 / 2013 <b>Transaction ID : 1128-2205-c</b>
Mailing Address ONE JAMES RIVER PLAZA, 20TH FLOOR P.O. BOX 26666		Amount of Each Receipt this Period 2500
City RICHMOND	State VA	Zip Code 23261
FEC ID number of contributing federal political committee. C C00108209	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500	

Full Name (Last, First, Middle Initial) <b>c. Duke Energy Corporation PAC</b>		Date of Receipt MM / DD / YYYY 03 / 01 / 2013 <b>Transaction ID : 1238-2204-c</b>
Mailing Address 550 S Tryon Street		Amount of Each Receipt this Period 5000
City Charlotte	State NC	Zip Code 28202-4200
FEC ID number of contributing federal political committee. C C00083535	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<b>TOTAL</b> 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 10 OF 32  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)  
**A. Wellpoint, Inc. WELLPAC**

Mailing Address 120 Monument Circle

City State Zip Code  
Indianapolis IN 46204-4906

FEC ID number of contributing federal political committee. **C C00197228**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 01 / 2013  
**Transaction ID : 531-2206-c**

Amount of Each Receipt this Period  
5000

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

Mailing Address 1875 I Street NW  
Suite 600

City State Zip Code  
Washington DC 20006-5413

FEC ID number of contributing federal political committee. **C C00303339**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2013  
**Transaction ID : 838-2212-c**

Amount of Each Receipt this Period  
2500

Full Name (Last, First, Middle Initial)  
**C. International Paper Political Action Committee**

Mailing Address 1101 Pennsylvania Avenue NW  
Suite 200

City State Zip Code  
Washington DC 20004-2514

FEC ID number of contributing federal political committee. **C C00034405**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2013  
**Transaction ID : 567-2210-c**

Amount of Each Receipt this Period  
5000

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 12500.00

**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 11 OF 32
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)  
**A. General Electric Company PAC**

Mailing Address 1299 Pennsylvania Avenue NW  
Suite 900W

City Washington State DC Zip Code 20004-2400

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000

Date of Receipt  
03 / 26 / 2013  
**Transaction ID : 715-2239-c**

Amount of Each Receipt this Period  
5000

Full Name (Last, First, Middle Initial)  
**B. Honeywell International PAC**

Mailing Address 101 Constitution Avenue NW  
Suite 500W

City Washington State DC Zip Code 20001-2177

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500

Date of Receipt  
03 / 26 / 2013  
**Transaction ID : 506-2240-c**

Amount of Each Receipt this Period  
2500

Full Name (Last, First, Middle Initial)  
**C. Koch Industries Inc Political Action Committee**

Mailing Address 600 14th Street NW  
Suite 800

City Washington State DC Zip Code 20005-2099

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500

Date of Receipt  
03 / 26 / 2013  
**Transaction ID : 579-2238-c**

Amount of Each Receipt this Period  
2500

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> 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 12 OF 32
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial) <b>A. American Hospital Association PAC</b>		Date of Receipt
Mailing Address 325 7th Street NW Suite 700		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20004-2801
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00106146"/>	<b>Transaction ID : 864-2257-c</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500"/>	<input type="text" value="2500"/>

Full Name (Last, First, Middle Initial) <b>B. FMR LLC PAC</b>		Date of Receipt
Mailing Address 82 Devonshire Street # N5A		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City Boston	State MA	Zip Code 02109-3605
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00215046"/>	<b>Transaction ID : 1380-2259-c</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000"/>	<input type="text" value="5000"/>

Full Name (Last, First, Middle Initial) <b>C. National Venture Capital Association Venturepac</b>		Date of Receipt
Mailing Address 1655 Fort Myer Drive Suite 850		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City Arlington	State VA	Zip Code 22209-3199
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00150367"/>	<b>Transaction ID : 1440-2261-c</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000"/>	<input type="text" value="5000"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="12500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 32
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Promoting Our Republican Team PAC**

**A. Raytheon Company PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1100 Wilson Boulevard  
Suite 1500  
City Arlington State VA Zip Code 22209-3900  
FEC ID number of contributing federal political committee. **C** C00097568  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 29 / 2013  
**Transaction ID : 1435-2254-c**  
Amount of Each Receipt this Period  
5000

**B. Realtors PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 430 N Michigan Avenue  
City Chicago State IL Zip Code 60611-4011  
FEC ID number of contributing federal political committee. **C** C00030718  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 29 / 2013  
**Transaction ID : 1234-2255-c**  
Amount of Each Receipt this Period  
5000

**C. SAIC Inc. Voluntary PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10260 Campus Point Drive  
Stop A3  
City San Diego State CA Zip Code 92121-1522  
FEC ID number of contributing federal political committee. **C** C00300418  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 29 / 2013  
**Transaction ID : 1281-2256-c**  
Amount of Each Receipt this Period  
5000

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> 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 14 OF 32
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Promoting Our Republican Team PAC**

**A. The Babcock & Wilcox Company PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2016 Mount Athos Road  
 City Lynchburg State VA Zip Code 24504-5447  
 FEC ID number of contributing federal political committee. **C** C00365502  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 29 / 2013  
**Transaction ID : 770-2258-c**  
 Amount of Each Receipt this Period  
 2500

**B. United for Health PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9900 Bren Road E  
 City Minnetonka State MN Zip Code 55343-9664  
 FEC ID number of contributing federal political committee. **C** C00274431  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 29 / 2013  
**Transaction ID : 1204-2260-c**  
 Amount of Each Receipt this Period  
 5000

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	77000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 32
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Receipt
Mailing Address PO Box 20706		<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
Atlanta	GA	30320-6001
FEC ID number of contributing federal political committee.		Transaction ID : <b>917-2228-e</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="880.8"/>
Name of Employer	Occupation	Refund of unused ticket fee
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1186.7"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Receipt
Mailing Address PO Box 20706		<input type="text" value="03"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
Atlanta	GA	30320-6001
FEC ID number of contributing federal political committee.		Transaction ID : <b>917-2227-e</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="305.9"/>
Name of Employer	Occupation	Refund of unused ticket fee
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1186.7"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
<input type="text" value="C"/>		<input type="text"/>
Name of Employer	Occupation	Refund of unused ticket fee
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1186.70"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="1186.70"/>

**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 16 OF 32
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Promoting Our Republican Team PAC**

**A. Deb Fischer For Us Senate Inc**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 317 S 12th Street  
 City Lincoln State NE Zip Code 68508-2197  
 FEC ID number of contributing federal political committee. **C** C00498907  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 01 / 2013  
**Transaction ID : 2251000**  
 Amount of Each Receipt this Period  
 5000  
 Uncashed check

**B. Friends Of Connie Mack Inc**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 519  
 City Naples State FL Zip Code 34106-0519  
 FEC ID number of contributing federal political committee. **C** C00391243  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 01 / 2013  
**Transaction ID : 2252000**  
 Amount of Each Receipt this Period  
 5000  
 Uncashed check

**C. Hinckley For Us Senate**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16 Gibbs Avenue  
 City Newport State RI Zip Code 02840-1824  
 FEC ID number of contributing federal political committee. **C** C00494120  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 01 / 2013  
**Transaction ID : 2253000**  
 Amount of Each Receipt this Period  
 2500  
 Uncashed check

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	12500.00

**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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. Charter Bus Service**

Mailing Address 1053 Ebenezer Road

City Cincinnati State OH Zip Code 45233-4820

Purpose of Disbursement  
Transportation

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-1415-2182-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Rob Lehman**

Mailing Address 6212 Loch Raven Drive

City McLean State VA Zip Code 22101-3133

Purpose of Disbursement  
Reimbursement for expenses: See Below

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-343-2154-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Esther Tombragel**

Mailing Address 8331 Little Harbor Drive

City Cincinnati State OH Zip Code 45244-2768

Purpose of Disbursement  
Compliance

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District: Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-3-2217-e**

Amount of Each Disbursement this Period

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

**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 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Airfare

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 09 / 2013

**Transaction ID : SB21B-917-2187-e**

Amount of Each Disbursement this Period

342.9

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 7800 Montgomery Road

City Cincinnati State OH Zip Code 45236-4388

Purpose of Disbursement  
Office Supplies

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 14 / 2013

**Transaction ID : SB21B-176-2188-e**

Amount of Each Disbursement this Period

745.46

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Airfare

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 16 / 2013

**Transaction ID : SB21B-917-2189-e**

Amount of Each Disbursement this Period

342.9

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

1431.26

**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 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 7800 Montgomery Road

City Cincinnati State OH Zip Code 45236-4388

Purpose of Disbursement  
Office Supplies

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 22 / 2013

Transaction ID : SB21B-176-2190-e

Amount of Each Disbursement this Period

102.14

Full Name (Last, First, Middle Initial)

**B. NK Baur & Associates, Inc.**

Mailing Address 9856 Archer Lane

City Dublin State OH Zip Code 43017-8914

Purpose of Disbursement  
Fundraising Consulting

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 27 / 2013

Transaction ID : SB21B-631-2177-e

Amount of Each Disbursement this Period

4000

Full Name (Last, First, Middle Initial)

**C. NK Baur & Associates, Inc.**

Mailing Address 9856 Archer Lane

City Dublin State OH Zip Code 43017-8914

Purpose of Disbursement  
Compliance

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 27 / 2013

Transaction ID : SB21B-631-2185-e

Amount of Each Disbursement this Period

4000

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

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

8102.14

**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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. The Cloister at Sea Island**

Mailing Address 100 Salt Marsh Drive

City State Zip Code  
Saint Simons Island GA 31522-1503

Purpose of Disbursement  
Reception Deposit

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-828-2183-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Drackett-Harth Realty**

Mailing Address 614 Wooster Pike

City State Zip Code  
Terrace Park OH 45174-1010

Purpose of Disbursement  
Rent

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-815-2174-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Enterprise Rental Car**

Mailing Address

City State Zip Code  
45174-1010

Purpose of Disbursement  
Car Rental

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-1193-2218-e**

Amount of Each Disbursement this Period

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

**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 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. The Caucus Room**

Mailing Address 401 9th Street NW

City Washington State DC Zip Code 20004-2128

Purpose of Disbursement  
Reception Food/Beverage

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-620-2219-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Rob Lehman**

Mailing Address 6212 Loch Raven Drive

City McLean State VA Zip Code 22101-3133

Purpose of Disbursement  
Reimbursement for expenses: See Below

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-343-2202-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines**

Mailing Address 2702 Love Field Drive

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement  
Airfare

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-1116-855-V**

Amount of Each Disbursement this Period

**[MEMO ITEM]**  
Subitemization of Rob Lehman ( 02/10/13 )

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

**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 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Airfare

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-917-2220-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Airfare

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-917-2221-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Airfare

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-917-2222-e**

Amount of Each Disbursement this Period

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

**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 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. Pearson & Associates**

Mailing Address 900 19th Street NW  
Floor 8

City Washington State DC Zip Code 20006-2105

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B-628-2181-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Pearson & Associates**

Mailing Address 900 19th Street NW  
Floor 8

City Washington State DC Zip Code 20006-2105

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B-628-2198-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Xpedite Systems**

Mailing Address

City State Zip Code 20006-2105

Purpose of Disbursement  
Fax Service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B-627-2180-e**

Amount of Each Disbursement this Period

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

**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 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. Pearson & Associates**

Mailing Address 900 19th Street NW  
Floor 8

City Washington State DC Zip Code 20006-2105

Purpose of Disbursement  
Fundraising Consulting

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2013

Transaction ID : SB21B-628-2197-e

Amount of Each Disbursement this Period

2000

Full Name (Last, First, Middle Initial)

**B. Rob Lehman**

Mailing Address 6212 Loch Raven Drive

City McLean State VA Zip Code 22101-3133

Purpose of Disbursement  
Reimbursement for expenses: See Below

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2013

Transaction ID : SB21B-343-2200-e

Amount of Each Disbursement this Period

119.5

Full Name (Last, First, Middle Initial)

**C. Drackett-Harth Realty**

Mailing Address 614 Wooster Pike

City Terrace Park State OH Zip Code 45174-1010

Purpose of Disbursement  
Rent

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 01 / 2013

Transaction ID : SB21B-815-2203-e

Amount of Each Disbursement this Period

912

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

3031.50

**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 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. NK Baur & Associates, Inc.**

Mailing Address 9856 Archer Lane

City Dublin State OH Zip Code 43017-8914

Purpose of Disbursement  
Fundraising Consulting

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-631-2208-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. NK Baur & Associates, Inc.**

Mailing Address 9856 Archer Lane

City Dublin State OH Zip Code 43017-8914

Purpose of Disbursement  
Compliance

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-631-2209-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Airtran Airlines**

Mailing Address 1800 Phoenix Boulevard  
Suite 104

City Atlanta State GA Zip Code 30349-5555

Purpose of Disbursement  
Airfare

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-1294-2232-e**

Amount of Each Disbursement this Period

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

**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 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. Aristotle International, Inc.**

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Compliance Software

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-173-2213-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Airfare

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-917-2230-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320-6001

Purpose of Disbursement  
Airfare

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-917-2231-e**

Amount of Each Disbursement this Period

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

**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 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. The Caucus Room**

Mailing Address 401 9th Street NW

City Washington State DC Zip Code 20004-2128

Purpose of Disbursement  
Reception Food/Beverage

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2013

Transaction ID : SB21B-620-2229-e

Amount of Each Disbursement this Period

4107.8

Full Name (Last, First, Middle Initial)

**B. Pearson & Associates**

Mailing Address 900 19th Street NW  
Floor 8

City Washington State DC Zip Code 20006-2105

Purpose of Disbursement  
Reimbursement Taxi Fare

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 25 / 2013

Transaction ID : SB21B-628-2215-e

Amount of Each Disbursement this Period

46

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666-0100

Purpose of Disbursement  
Airfare

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 25 / 2013

Transaction ID : SB21B-1115-2249-e

Amount of Each Disbursement this Period

405.8

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

4559.60

**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 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. Xpedite Systems**

Mailing Address

City State Zip Code  
60666-0100

Purpose of Disbursement  
Fax Service

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-627-2214-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Drackett-Harth Realty**

Mailing Address 614 Wooster Pike

City State Zip Code  
Terrace Park OH 45174-1010

Purpose of Disbursement  
Rent

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B-815-2246-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

**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 Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. Capito for West Virginia**

Mailing Address PO Box 11519

City Charleston State WV Zip Code 25339-1519

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ms. Shelley Moore Capito**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WV District: 02

Date of Disbursement

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

**Transaction ID : SB23-1424-2193-e**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Capito for West Virginia**

Mailing Address PO Box 11519

City Charleston State WV Zip Code 25339-1519

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ms. Shelley Moore Capito**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WV District: 02

Date of Disbursement

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

**Transaction ID : SB23-1424-2194-e**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Deb Fischer For Us Senate Inc**

Mailing Address 317 S 12th Street

City Lincoln State NE Zip Code 68508-2197

Purpose of Disbursement  
Contribution

011

Candidate Name

**Debra S Fischer**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
Retire Debt - G2012

State: NE District:

Date of Disbursement

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

**Transaction ID : SB23-1274-2226-e**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	5	0	0	0	0	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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 checked="" 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. Butler County Republican Party**

Mailing Address 3431 Princeton Road  
Space 100

City Hamilton State OH Zip Code 45011-7981

Purpose of Disbursement  
Contribution

011

Candidate Name

**Butler County Republican Party**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23-1421-2207-e**

Amount of Each Disbursement this Period

1	2	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Collins For Senator**

Mailing Address PO Box 1096

City Bangor State ME Zip Code 04402-1096

Purpose of Disbursement  
Contribution

011

Candidate Name

**Susan M Collins**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: ME District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	3

**Transaction ID : SB23-1430-2242-e**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Collins For Senator**

Mailing Address PO Box 1096

City Bangor State ME Zip Code 04402-1096

Purpose of Disbursement  
Contribution

011

Candidate Name

**Susan M Collins**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: ME District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	3

**Transaction ID : SB23-1430-2285-e**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	1	2	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	1	2	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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 checked="" 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. National Republican Senatorial Committee**

Mailing Address 425 2nd Street NE

City Washington State DC Zip Code 20002-4914

Purpose of Disbursement  
Contribution

011

Candidate Name

**National Republican Senatorial Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2013

**Transaction ID : SB23-685-2243-e**

Amount of Each Disbursement this Period

15000

Full Name (Last, First, Middle Initial)

**B. Team Graham Inc**

Mailing Address PO Box 1801

City Columbia State SC Zip Code 29202-1801

Purpose of Disbursement  
Contribution

011

Candidate Name

**Lindsey Graham**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: SC District:

Date of Disbursement

MM / DD / YYYY  
03 / 28 / 2013

**Transaction ID : SB23-1432-2244-e**

Amount of Each Disbursement this Period

5000

Full Name (Last, First, Middle Initial)

**C. Team Graham Inc**

Mailing Address PO Box 1801

City Columbia State SC Zip Code 29202-1801

Purpose of Disbursement  
Contribution

011

Candidate Name

**Lindsey Graham**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: SC District:

Date of Disbursement

MM / DD / YYYY  
03 / 28 / 2013

**Transaction ID : SB23-1432-2250-e**

Amount of Each Disbursement this Period

5000

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

25000.00

**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 Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Promoting Our Republican Team PAC**

Full Name (Last, First, Middle Initial)

**A. Tim Scott For Congress**

Mailing Address 1405 Ashley River Road

City Charleston State SC Zip Code 29407-5305

Purpose of Disbursement  
Contribution

011

Candidate Name

**Timothy Scott**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: SC District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2013

Transaction ID : SB23-1434-2245-e

Amount of Each Disbursement this Period

5000
------

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

5000.00
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56200.00
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