

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Republican Majority Fund

ADDRESS (number and street) 901 N Washington St, Ste 700
Check if different than previously reported. (ACC) Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00296640 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 [MM] / [DD] / [YYYY] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [09] / [01] / [2018] through [09] / [30] / [2018]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Koch, Theodore, , ,
Type or Print Name of Treasurer

Signature of Treasurer Koch, Theodore, , , [Electronically Filed] Date [10] / [18] / [2018]

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Republican Majority Fund

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="2018"/>	<input type="text" value=""/>	<input type="text" value="423922.95"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="248035.68"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="102997.72"/>	<input type="text" value="459291.16"/>
(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="351033.40"/>	<input type="text" value="883214.11"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="85265.63"/>	<input type="text" value="617446.34"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="265767.77"/>	<input type="text" value="265767.77"/>
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="4881.50"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Republican Majority Fund

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).....	1000.00	68800.00
(ii) Unitemized	273.00	41020.07
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1273.00	109820.07
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	36500.00	121000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	37773.00	230820.07
12. Transfers From Affiliated/Other Party Committees.....	65224.72	220404.33
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	3066.76
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
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)).....▶	102997.72	459291.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	102997.72	459291.16

DETAILED SUMMARY PAGE
of Disbursements

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	30755.47	400200.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	30755.47	400200.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	23500.00	113500.00
24. Independent Expenditures (use Schedule E)	31010.16	101626.12
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	2120.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	85265.63	617446.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	85265.63	617446.34

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	37773.00	230820.07
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	37773.00	230820.07
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	30755.47	400200.22
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	3066.76
38. Net Operating Expenditures (subtract Line 37 from Line 36)	30755.47	397133.46

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

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

FOR LINE NUMBER: PAGE 6 OF 28
(check only one)

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

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)
Republican Majority Fund

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BROOKS, BOB, R., ,

Mailing Address **1107 N PITT ST UNIT 2C**

City ALEXANDRIA	State VA	Zip Code 22314-1462
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALIPINE GROUP	Occupation (for Individual) PRINCIPAL
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 27 / 2018

Transaction ID : SA11A.122860

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00

**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 7 OF 28
<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)
Republican Majority Fund

A. UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 700 13TH STREET NW STE. 350

City WASHINGTON	State DC	Zip Code 20005-6621
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FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer (for Individual) Occupation (for Individual)

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
09		06		2018

Transaction ID : SA11C.122504

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. AICPA PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 220 LEIGH FARM RD.
PALLADIAN CORPORATE CENTER I

City DURHAM	State NC	Zip Code 27707-8110
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FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer (for Individual) Occupation (for Individual)

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
09		14		2018

Transaction ID : SA11C.122545

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. COMCAST CORPORATION & NBCUNIVERSAL PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1701 JFK BLVD., 49TH FLOOR

City PHILADELPHIA	State PA	Zip Code 19103-2855
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FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer (for Individual) Occupation (for Individual)

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
09		14		2018

Transaction ID : SA11C.122540

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 8 OF 28
<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)
Republican Majority Fund

A. COMPASS BANCSHARES, INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 10566

City BIRMINGHAM	State AL	Zip Code 35296-0001
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FEC ID number of contributing federal political committee. **C** C00142596

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2018

Transaction ID : SA11C.122541

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. EXPERIAN NORTH AMERICA, INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 475 ANTON BLVD.

City COSTA MESA	State CA	Zip Code 92626-7037
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FEC ID number of contributing federal political committee. **C** C00379768

Name of Employer (for Individual) Occupation (for Individual)

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
09		14		2018

Transaction ID : SA11C.122542

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. HOLLAND & KNIGHT COMMITTEE FOR EFFECTIVE GOVERNMENT
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 800 17TH STREET NW STE. 1100

City WASHINGTON	State DC	Zip Code 20006-3962
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FEC ID number of contributing federal political committee. **C** C00171330

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2018

Transaction ID : SA11C.122543

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	8000.00
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 9 OF 28
<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)
Republican Majority Fund

A. INDEPENDENT COMMUNITY BANKERS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1615 L STREET NW STE. 900

City WASHINGTON	State DC	Zip Code 20036-5623
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FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer (for Individual) Occupation (for Individual)

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
09	/	14	/	2018

Transaction ID : SA11C.122539

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

B. NATIONAL ASSOC. OF REAL ESTATE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1875 I STREET NW STE 600

City WASHINGTON	State DC	Zip Code 20006-5413
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FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09	/	14	/	2018

Transaction ID : SA11C.122544

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. AT&T INC. FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 208 S. AKARD STREET SUITE 1812

City DALLAS	State TX	Zip Code 75202-4206
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FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09	/	24	/	2018

Transaction ID : SA11C.122649

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8000.00
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 10 OF 28
<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)
Republican Majority Fund

A. INDEPENDENT COMMUNITY BANKERS PAC

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

Mailing Address 1615 L STREET NW STE. 900

City WASHINGTON	State DC	Zip Code 20036-5623
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FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer (for Individual) Occupation (for Individual)

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
09		30		2018

Transaction ID : SA11C.123622

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. NABPAC

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

Mailing Address 1771 N. STREET NW

City WASHINGTON	State DC	Zip Code 20036-2800
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FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2018

Transaction ID : SA11C.123624

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA PAC

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

Mailing Address 8700 WEST BRYN MAWR SUITE 1200S

City CHICAGO	State IL	Zip Code 60631-3512
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FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2018

Transaction ID : SA11C.123623

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	36500.00

**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 11 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Republican Majority Fund

A. COTTON VICTORY
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 901 N WASHINGTON ST
SUITE 700

City ALEXANDRIA State VA Zip Code 22314-5509

FEC ID number of contributing federal political committee. **C** C00571018

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220404.33

Date of Receipt
09 / 30 / 2018
Transaction ID : SA12.123627

Amount of Each Receipt this Period
65224.72

Memo Item
TRANSFER

B. ANWAR, S. JAVAID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 110 N. MARIENFELD STE. 101

City MIDLAND State TX Zip Code 79701-4412

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

Name of Employer (for Individual) Occupation (for Individual)
MIDLAND ENERGY INC. C.E.O./PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
06 / 28 / 2018
Transaction ID : SA.121390.1.Q318

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM COTTON VICTORY

C. ARNOTT, ROBERT, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 53725

City IRVINE State CA Zip Code 92619-3725

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

Name of Employer (for Individual) Occupation (for Individual)
RESEARCH AFFILIATES L.L.C. C.E.O./CHAIRMAN

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
06 / 29 / 2018
Transaction ID : SA.121406.1.Q318

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM COTTON VICTORY

SUBTOTAL of Receipts This Page (optional).....	65224.72
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 12 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Republican Majority Fund

A. BRIDWELL, TUCKER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1616
 City ABILENE State TX Zip Code 79604-1616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANSFELD INVESTMENTS Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt 06 / 28 / 2018
Transaction ID : SA.121394.1.Q318
 Amount of Each Receipt this Period 4600.00
 Memo Item
 TRANSFER
 TRANSFER FROM COTTON VICTORY

B. DROR, BRIAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5967 W. 3RD ST #102
 City LOS ANGELES State CA Zip Code 90036-2835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) C.P.A.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 05 / 11 / 2018
Transaction ID : SA.119042.1.Q318
 Amount of Each Receipt this Period 2700.00
 Memo Item
 TRANSFER
 TRANSFER FROM COTTON VICTORY

C. DUNN, PETER, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 POTOMAC PASSAGE PH 9
 City NATIONAL HARBOR State MD Zip Code 20745-1583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PETERSON COMPANIES Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 03 / 2018
Transaction ID : SA.122104.1.Q318
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM COTTON VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
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 13 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Republican Majority Fund

A. FEAVEL, DAVID, L., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6222 LUPTON DR.

City DALLAS	State TX	Zip Code 75225-2117
----------------	-------------	------------------------

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

Name of Employer (for Individual) EXL PETROLEUM, LP	Occupation (for Individual) PARTNER/GEOLOGIST
--	--

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
09	/	14	/	2018

Transaction ID : SA.122555.1.Q318

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM COTTON VICTORY

B. FOGEL, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 649 MERWINS LANE

City FAIRFIELD	State CT	Zip Code 06824-1973
-------------------	-------------	------------------------

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

Name of Employer (for Individual) INDEXIQ	Occupation (for Individual) BUSINESS EXECUTIVE
--	---

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
09	/	04	/	2018

Transaction ID : SA.122470.1.Q318

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM COTTON VICTORY

C. FROST, HOLLOWAY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 667

City HOUSTON	State TX	Zip Code 77001-0667
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2018

Transaction ID : SA.121824.1.Q318

Amount of Each Receipt this Period
4600.00

Memo Item
TRANSFER
TRANSFER FROM COTTON VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	0.00
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 14 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Republican Majority Fund

A. KELLER, ASHLEY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 E WALTON STREET
 City CHICAGO State IL Zip Code 60611-1670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLER LENKNER Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 09 / 2018
Transaction ID : SA.121651.1.Q318
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM COTTON VICTORY

B. LANGONE, ELAINE, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 SANDS POINT RD.
 City PORT WASHINGTON State NY Zip Code 11050-1127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 04 / 2018
Transaction ID : SA.122473.1.Q318
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM COTTON VICTORY

C. LANGONE, KENNETH, G., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 375 PARK AVENUE
 City NEW YORK State NY Zip Code 10152-3804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INVEMED Occupation (for Individual) BUSINESS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 04 / 2018
Transaction ID : SA.122474.1.Q318
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM COTTON VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
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 15 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Republican Majority Fund

A. NASSETTA, CHRISTOPHER, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5028 30TH STREET N.

City ARLINGTON	State VA	Zip Code 22207-2717
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HILTON CORP.	Occupation (for Individual) PRESIDENT & C.E.O.
---	---

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
08	/	14	/	2018

Transaction ID : SA.122150.1.Q318

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM COTTON VICTORY

B. NAZARI, NERSI, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 99 BELLBROOK WAY

City ATHERTON	State CA	Zip Code 94027-6405
------------------	-------------	------------------------

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

Name of Employer (for Individual) VITAL CONNECT, INC.	Occupation (for Individual) C.E.O.
--	---------------------------------------

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	/	18	/	2018

Transaction ID : SA.121722.1.Q318

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM COTTON VICTORY

C. RASTIN, THOMAS, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1240 GAMBIEN ROAD

City MT. VERNON	State OH	Zip Code 43050-3842
--------------------	-------------	------------------------

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

Name of Employer (for Individual) ARIEL CORPORATION	Occupation (for Individual) EXECUTIVE VICE PRESIDENT
--	---

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	/	17	/	2018

Transaction ID : SA.121709.1.Q318

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM COTTON VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
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 16 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Republican Majority Fund

A. ROSS, ADAM, B., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5956 SHERRY LN #930

City DALLAS	State TX	Zip Code 75225-8020
----------------	-------------	------------------------

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

Name of Employer (for Individual) GOLDCREST CAPITAL	Occupation (for Individual) MANAGING PARTNER
--	---

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	/	31	/	2018

Transaction ID : SA.122012.1.Q318

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM COTTON VICTORY

B. STAI, DIAN, GRAVES, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 PINE STE. 1000

City ABILENE	State TX	Zip Code 79601-5142
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2018

Transaction ID : SA.121395.1.Q318

Amount of Each Receipt this Period
4600.00

Memo Item
TRANSFER
TRANSFER FROM COTTON VICTORY

C. STONE, ROGER, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1101 SKOKIE BLVD., SUITE 300

City NORTHBROOK	State IL	Zip Code 60062-4124
--------------------	-------------	------------------------

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

Name of Employer (for Individual) KAPSTONE PAPER AND PACKAGING	Occupation (for Individual) CHAIRMAN & C.E.O.
---	--

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
08	/	24	/	2018

Transaction ID : SA.122352.1.Q318

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM COTTON VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
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 17 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Republican Majority Fund

A. TAMASI, DAVID, , MR. ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5435 30TH PL., NW
 City WASHINGTON State DC Zip Code 20015-1251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RASKY PARTNERS Occupation (for Individual) GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 09 / 2018
Transaction ID : SA.122128.1.Q318
 Amount of Each Receipt this Period 2500.00
 Memo Item
 TRANSFER
 TRANSFER FROM COTTON VICTORY

B. UIHLEIN, RICHARD, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1396 N. WAUKEGAN RD
 City LAKE FOREST State IL Zip Code 60045-1147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ULINE Occupation (for Individual) C.E.O./OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 24 / 2018
Transaction ID : SA.122351.1.Q318
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM COTTON VICTORY

C. WALL, KATHLEEN, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 667
 City HOUSTON State TX Zip Code 77001-0667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt 07 / 23 / 2018
Transaction ID : SA.121827.1.Q318
 Amount of Each Receipt this Period 4600.00
 Memo Item
 TRANSFER
 TRANSFER FROM COTTON VICTORY

SUBTOTAL of Receipts This Page (optional).....	0.00
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 18 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Republican Majority Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WRIGHT, KAREN, A., ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 17 / 2018
Mailing Address 1240 GAMBIER ROAD			Transaction ID : SA.121708.1.Q318
City MOUNT VERNON	State OH	Zip Code 43050-3842	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			<input checked="" type="checkbox"/> Memo Item TRANSFER
Name of Employer (for Individual) ARIEL CORPORATION		Occupation (for Individual) PRESIDENT & CEO	TRANSFER FROM COTTON VICTORY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B.			Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address			Amount of Each Receipt this Period
City	State	Zip Code	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.			Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address			Amount of Each Receipt this Period
City	State	Zip Code	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼		

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	65224.72

**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"/> 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)
Republican Majority Fund

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK		Date of Disbursement MM / DD / YYYY 09 / 05 / 2018
Mailing Address 1445-A LAUGHLIN AVENUE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I4165 Amount of Each Disbursement this Period 40.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement PAC BANK FEE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CAMPAIGN SOLUTIONS		Date of Disbursement MM / DD / YYYY 09 / 06 / 2018
Mailing Address 117 N SAINT ASAPH ST		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I4166 Amount of Each Disbursement this Period 446.60
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement PAC ONLINE FUNDRAISING & PROCESSING FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. KRISTOL, JOSEPH, , ,		Date of Disbursement MM / DD / YYYY 09 / 10 / 2018
Mailing Address 423 E 84TH STREET APT. 2		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I4088 Amount of Each Disbursement this Period 1725.00
City NEW YORK	State NY	Zip Code 10028
Purpose of Disbursement PAC FUNDRAISING/MANAGEMENT CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

2211.60

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"/> 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)
Republican Majority Fund

Full Name (Last, First, Middle Initial)
A. RITCHIE, ANDREW, S., ,

Mailing Address 1001 4TH STREET, SW APT #317

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement
PAC FUNDRAISING/POLITICAL CONSULTING

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I4092
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)
B. AMERICAN EXPRESS

Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
CREDIT CARD PAYMENT: TRAVEL

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I4129
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)
C. AMERICAN EXPRESS

Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
CREDIT CARD PAYMENT: SEE MEMOS

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I4130
Amount of Each Disbursement this Period

Memo Item

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"/> 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)
Republican Majority Fund

Full Name (Last, First, Middle Initial)

A. LEVY RESTAURANTS

Mailing Address 1500 SOUTH CAPITOL STREET SW

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC CATERING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2018

FEC Identification Number

C
Transaction ID : SB21B.I4167
Amount of Each Disbursement this Period
1876.88

Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
PAC BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2018

FEC Identification Number

C
Transaction ID : SB21B.I4164
Amount of Each Disbursement this Period
40.00

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICA RISING CORPORATION

Mailing Address 1500 WILSON BLVD.
5TH FLOOR

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
PAC RESEARCH SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2018

FEC Identification Number

C
Transaction ID : SB21B.I4099
Amount of Each Disbursement this Period
13000.00

Memo Item

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

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

13040.00

**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"/> 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)
Republican Majority Fund

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAC WEBSITE/EMAIL SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I4098

Amount of Each Disbursement this Period

[REDACTED] 2505.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
PAC PO BOX/MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 14 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I4096

Amount of Each Disbursement this Period

[REDACTED] 655.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KOCH & HOOS, LLC

Mailing Address 901 N WASHINGTON ST STE 700

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAC ACCOUNTING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 19 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I4102

Amount of Each Disbursement this Period

[REDACTED] 4865.00

Memo Item

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

[REDACTED] 8025.00

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

[REDACTED]

**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"/> 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)
Republican Majority Fund

Full Name (Last, First, Middle Initial) A. KRISTOL, JOSEPH, , ,		Date of Disbursement MM / DD / YYYY 09 / 20 / 2018
Mailing Address 423 E 84TH STREET APT. 2		FEC Identification Number C [] Transaction ID : SB21B.I4128
City NEW YORK	State NY	Zip Code 10028
Purpose of Disbursement PAC FUNDRAISING/MANAGEMENT CONSULTING		Amount of Each Disbursement this Period [] 1725.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. D. MOSS & COMPANY, LLC		Date of Disbursement MM / DD / YYYY 09 / 26 / 2018
Mailing Address 3722 MUNSON ROAD		FEC Identification Number C [] Transaction ID : SB21B.I4150
City FALLS CHURCH	State VA	Zip Code 22041
Purpose of Disbursement PAC FUNDRAISING CONSULTING		Amount of Each Disbursement this Period [] 3000.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C []
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period []
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	4725.00
TOTAL This Period (last page this line number only).....▶	30755.47

**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"/> 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)
Republican Majority Fund

A. CINDY HYDE-SMITH FOR US SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 2930

M M M	/	D D D	/	Y Y Y Y Y
09		13		2018

City JACKSON State MS Zip Code 39207

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION

C	C00675348
---	-----------

Candidate Name
HYDE-SMITH, CINDY, , ,

Category/
Type

Transaction ID : SB23.I4095

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) Special General
State: MS District: 00

5000.00

Memo Item

B. REPUBLICAN NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 310 FIRST ST SE

M M M	/	D D D	/	Y Y Y Y Y
09		18		2018

City WASHINGTON State DC Zip Code 20003

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION

C	
---	--

Candidate Name

Category/
Type

Transaction ID : SB23.I4186

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) Annual
State: District:

2000.00

Memo Item

C. REPUBLICAN NATIONAL COMMITTEE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 310 FIRST ST SE

M M M	/	D D D	/	Y Y Y Y Y
09		19		2018

City WASHINGTON State DC Zip Code 20003

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION

C	
---	--

Candidate Name

Category/
Type

Transaction ID : SB23.I4187

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) Annual
State: District:

1500.00

Memo Item

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

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

8500.00

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

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NAME OF COMMITTEE (In Full)
Republican Majority Fund

Full Name (Last, First, Middle Initial) A. TED CRUZ FOR SENATE		Date of Disbursement MM / DD / YYYY 09 / 20 / 2018
Mailing Address 815 A BRAZOS PMB 550		FEC Identification Number C00492785 Transaction ID : SB23.I4142
City AUSTIN	State TX	Zip Code 78701
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name CRUZ, RAFAEL, EDWARD TED, ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: TX	District: 00	

Full Name (Last, First, Middle Initial) B. BOB HUGIN FOR SENATE INC.		Date of Disbursement MM / DD / YYYY 09 / 25 / 2018
Mailing Address PO BOX 8656		FEC Identification Number C00671305 Transaction ID : SB23.I4145
City SOMERVILLE	State NJ	Zip Code 08876
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name HUGIN, ROBERT, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: NJ	District: 00	

Full Name (Last, First, Middle Initial) C. MIKE BRAUN FOR INDIANA		Date of Disbursement MM / DD / YYYY 09 / 27 / 2018
Mailing Address PO BOX 159		FEC Identification Number C00653147 Transaction ID : SB23.I4152
City ZIONSVILLE	State IN	Zip Code 46077
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name BRAUN, MIKE, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: IN	District: 00	

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

15000.00

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

23500.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 26 OF 28
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Republican Majority Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Arent Fox LLP			Nature of Debt (Purpose): PAC Legal Services
Mailing Address 1717 K Street, NW			
City Washington	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period		Transaction ID : SD10.1682	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
4881.50	0.00	4881.50	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)..... ▶	4881.50
2) TOTALS This Period (last page this line number only)..... ▶	4881.50
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	4881.50

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Republican Majority Fund		FEC IDENTIFICATION NUMBER ▼ C C00296640
--	--	---

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee CONNELL DONATELLI, INC. <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 117 NORTH SAINT ASAPH STREET		Amount <input type="text"/>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure ONLINE ADVERTISING		Category/Type <input type="text"/>
Name of Federal Candidate: TUCKER, EVERETT, CLARKE, , IV <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: AR
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 101626.12		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee NATURAL STATE MEDIA LLC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 2790 S THOMPSON STREET SUITE 101		Amount <input type="text"/>
City SPRINGDALE	State AR	Zip Code 72764
Purpose of Expenditure ONLINE ADVERTISING		Category/Type <input type="text"/>
Name of Federal Candidate: TUCKER, EVERETT, CLARKE, , IV <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: AR
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 101626.12		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 11500.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KOCH, THEODORE, , ,

[Electronically Filed]

Date

/ /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Republican Majority Fund
FEC IDENTIFICATION NUMBER
C C00296640

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee THE LUKENS COMPANY
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR
City ARLINGTON State VA Zip Code 22206
Purpose of Expenditure DIRECT MAIL
Name of Federal Candidate: TUCKER, EVERETT, CLARKE, , IV
Office Sought: House District: 02 State: AR
Disbursement For: General 2018
Amount 5010.16
Transaction ID: SE24.4089
Date of Disbursement or Obligation 09/05/2018

Full Name of Payee THE LUKENS COMPANY
Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR
City ARLINGTON State VA Zip Code 22206
Purpose of Expenditure DIRECT MAIL
Name of Federal Candidate: TUCKER, EVERETT, CLARKE, , IV
Office Sought: House District: 02 State: AR
Disbursement For: General 2018
Amount 14500.00
Transaction ID: SE24.4093
Date of Disbursement or Obligation 09/12/2018

(a) SUBTOTAL of Itemized Independent Expenditures 19510.16
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 31010.16

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

KOCH, THEODORE, ,

[Electronically Filed]

Date 09/13/2018

Signature