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National Court Reporters Association  
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Tel: 703-556-6272 • Fax: 703-391-0629  
800-272-NCRA (6272) • NCRA.org

January 10, 2017

Federal Election Commission  
999 E Street NW  
Washington, DC 20463

To whom it may concern:

Enclosed you will find the amended 3X report for the 30 day Post-General period of 2016, and the January 31 year end report of the National Court Reporters Association PAC. If you should have any questions or concerns, please contact me at [mbarusch@ncra.org](mailto:mbarusch@ncra.org) or at 703-584-9017. Thank you.

Sincerely,

Matthew R. Barusch  
Manager, State Government Relations

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

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

12FE4M5

National Court Reporters Association

ADDRESS (number and street) 12030 Sunrise Valley Drive Suite 400 Reston VA 20191

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00146506

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), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), 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 10 01 2016 through 11 28 2016

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 Michael Nelson

Signature of Treasurer Michael Nelson

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.

Table with 10 columns for Office Use Only

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**National Court Reporters Association**

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="2016"/>	<input type="text" value=""/>	<input type="text" value="55703.44"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="48977.18"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="3845.00"/>	<input type="text" value="12300.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<input type="text" value="52822.18"/>	<input type="text" value="68003.44"/>
7. Total Disbursements (from Line 31) .....	<input type="text" value="107.94"/>	<input type="text" value="15289.20"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<input type="text" value="52714.24"/>	<input type="text" value="52714.24"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**National Court Reporters Association**

Report Covering the Period: From:

MM / DD / YYYY  
10 / 01 / 2016

To:

MM / DD / YYYY  
11 / 28 / 2016

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).....	350.00	2050.00
(ii) Unitemized.....	3495.00	10250.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3845.00	12300.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	3845.00	12300.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5).....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	3845.00	12300.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3845.00	12300.00

**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 .....	107.94	1039.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	107.94	1039.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	14250.00
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	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 .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	107.94	15289.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	107.94	15289.20

**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) .....	3845.00	12300.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3845.00	12300.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	107.94	1039.20
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	107.94	1039.20

NON-FEDERAL CAMPAIGN

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 8	
	<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)  
**National Court Reporters Association**

Full Name (Last, First, Middle Initial) <b>A. Janet Hamilton</b>		Date of Receipt
Mailing Address 1366 Kinloch Circle		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2016"/>
City Arnold	State MD	Zip Code 21012
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.11212
Name of Employer self		Occupation Freelance Court reporter
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="350.00"/>		Contribution

Full Name (Last, First, Middle Initial) <b>B. Mrs. Lisa Michaels</b>		Date of Receipt
Mailing Address 155 Miramonte Drive		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2016"/>
City Fullerton	State CA	Zip Code 92835
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.11172
Name of Employer Chase Deposition Services		Occupation Freelance Reporter/Firm Owner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>		Contribution

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. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text"/>
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="350.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="350.00"/>

NON-FEDERAL CONTRIBUTION

**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)						PAGE 7 OF 8				
	<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

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NAME OF COMMITTEE (In Full)  
**National Court Reporters Association**

Full Name (Last, First, Middle Initial) <b>A. SunTrust Bank</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address P.O. Box 622227		Transaction ID : SB21B.11245
City Orlando	State FL	Zip Code 32862
Purpose of Disbursement Merchant fee	Candidate Name	Amount of Each Disbursement this Period 1.05
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) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SunTrust Bank</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address P.O. Box 622227		Transaction ID : SB21B.11246
City Orlando	State FL	Zip Code 32862
Purpose of Disbursement Merchant fee	Candidate Name	Amount of Each Disbursement this Period 28.34
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) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SunTrust Bank</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2016
Mailing Address P.O. Box 622227		Transaction ID : SB21B.11247
City Orlando	State FL	Zip Code 32862
Purpose of Disbursement Merchant fee	Candidate Name	Amount of Each Disbursement this Period 20.17
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) ▼	Category/ Type
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	49.56
<b>TOTAL</b> This Period (last page this line number only).....▶	

NON-FEDERAL CAMPAIGN



**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)						PAGE 8 OF 8				
	<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

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NAME OF COMMITTEE (In Full)  
**National Court Reporters Association**

Full Name (Last, First, Middle Initial)		Date of Disbursement							
<b>A. SunTrust Bank</b>		<table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>11</td> <td>10</td> <td>2016</td> </tr> </table>		MM	DD	YYYY	11	10	2016
MM	DD	YYYY							
11	10	2016							
Mailing Address P.O. Box 622227		<b>Transaction ID : SB21B.11248</b>							
City Orlando	State FL	Zip Code 32862	Amount of Each Disbursement this Period						
Purpose of Disbursement Merchant fee	Candidate Name		<table border="1"><tr><td>21.66</td></tr></table>	21.66					
21.66									
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) ▼		Category/ Type						
State: District:									

Full Name (Last, First, Middle Initial)		Date of Disbursement							
<b>B. SunTrust Bank</b>		<table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>11</td> <td>10</td> <td>2016</td> </tr> </table>		MM	DD	YYYY	11	10	2016
MM	DD	YYYY							
11	10	2016							
Mailing Address P.O. Box 622227		<b>Transaction ID : SB21B.11250</b>							
City Orlando	State FL	Zip Code 32862	Amount of Each Disbursement this Period						
Purpose of Disbursement Merchant fee	Candidate Name		<table border="1"><tr><td>27.73</td></tr></table>	27.73					
27.73									
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) ▼		Category/ Type						
State: District:									

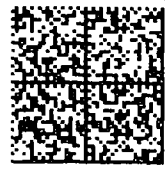
Full Name (Last, First, Middle Initial)		Date of Disbursement							
<b>C. SunTrust Bank</b>		<table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>11</td> <td>10</td> <td>2016</td> </tr> </table>		MM	DD	YYYY	11	10	2016
MM	DD	YYYY							
11	10	2016							
Mailing Address P.O. Box 622227		<b>Transaction ID : SB21B.11251</b>							
City Orlando	State FL	Zip Code 32862	Amount of Each Disbursement this Period						
Purpose of Disbursement Merchant fee	Candidate Name		<table border="1"><tr><td>8.99</td></tr></table>	8.99					
8.99									
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) ▼		Category/ Type						
State: District:									

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"><tr><td>58.38</td></tr></table>	58.38
58.38		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"><tr><td>107.94</td></tr></table>	107.94
107.94		

4 2017 JAN 24 AM 11:45



National Court Reporters Association  
30 Sunrise Valley Drive, Suite 400  
Arlington, VA 20191-3484



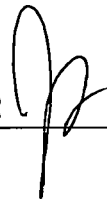
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<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER   
 (3/2015)

11/24/17  
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