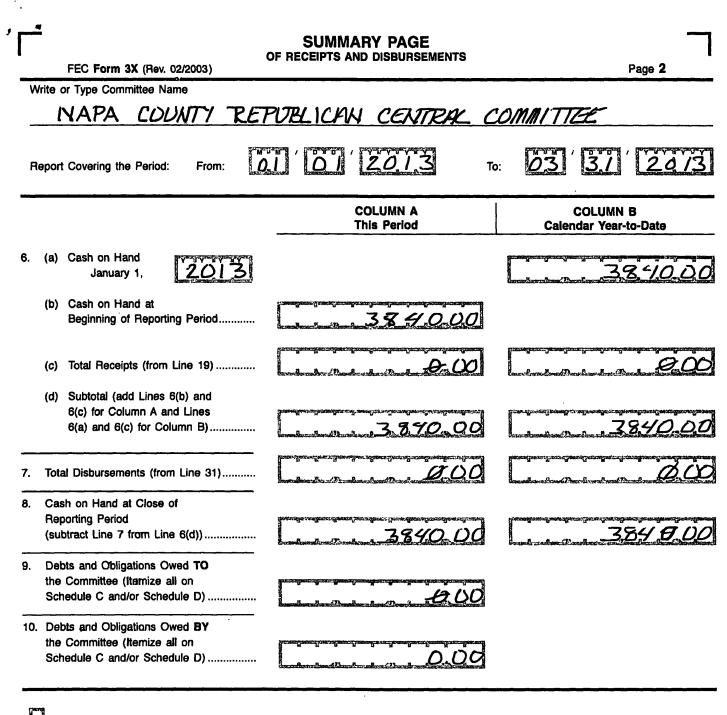
FORM 3X Fo	ND DISBURSE	ed Committee	FEC MAIL Office Use O	CENTER
COMMITTEE (in full)		ver the lines.	L2FE4M5	<u>E</u>
	P.D. BOX 324	<u> </u>	· · · · · · · · · · · ·	<u> </u>
ADDRESS (number and street)				
than previously reported. (ACC)	NAPA	<u> </u>	CA 9455	8-1
2. FEC IDENTIFICATION NUM		S	TATE 🔺 ZIP	
C 00455659	3. IS THIS REPOR		AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb 20 (M Report Due On: Mar 20 (M		Aug 20 (M8) Sep 20 (M9)	Nov 20 (Non-Electic Year Only) Dec 20
(a) Quarterly Reports:	Apr 20 (M		Oct 20 (M10)	(Non-Electic Year Only) Jan 31 (
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3)	(C) 12-Day PRE-Election Report for the:	Primary (12P) Convention (12C)	General (12G) Special (12S)	Runoff (1
January 31 Year-End Report (YE	Classica en	₩ M / O D / 1		the ate of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R)	Special (
Termination Report (TER)	Election on	₩ M / D 7		the Late of
5. Covering Period	-	ы м through .	, по / Y Y Y	Ÿ
I certify that I have examined this Type or Print Name of Treasurer		nowledge and belief it is true NNS	e, correct and complete.	
0	and Roal	into p	ate \$4 \$	5 × 20

-

-

٨.



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

FE6AN026

-

¢¢

0 T 0

O

M

-

	D FEC Form 3X (Rev. 06/2004)	ETAILED SUMMARY PAGE of Receipts	Page 3
W	rite or Type Committee Name		
		BLICAN CENTRAL CO	MMITTEE
_		MI / NOTO / NYTYTY	
Re	eport Covering the Period: From:	1 01 2013 TO	· @3 31 2013
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:		
	(a) Individuals/Persons Other		
	Than Politica) Committees (i) Itemized (use Schedule A)	מחוז	IX O
			Line not find the second
	(ii) Unitemized	<i>m.co</i>	ØC
	(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)▶	<u>Ø.00</u>	
			AN
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	<u> <u> </u></u>	Let a co a go Di
	(c) Other Political Commutees (such as PACs)	12.011	60
	(d) Total Contributions (add Lines	tanahanahanéhanahanéhanah yéha tén Sant	her almost and the description day from the
	11(a)(iii), (b), and (c)) (Carry		
	Totale to Line 33, page 5)	0.00	Lange Da
12.	Transfers From Affiliated/Other	and the second	langter and a set of a
	Party Committees	<u> <u> </u></u>	Lange PD
12	All Loans Received	(771	DOC
10.		and the stand of the second	hand and have been the section of th
14	Loan Repayments Received	$\alpha' \alpha$	I AN
	Offsets To Operating Expenditures	La contrational and the second s	Lease and a second second
	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)	Ø CO	ØO
16.	Refunds of Contributions Made	Contents Annor Character Laboration of Control Library Sector Sector Sector Control and Control Sector Sector S	l man sine and marked damas frances in the set of the s
	to Federal Candidates and Other	A CO	
. 7	Political Committees	Line p.D	La son a good
	Other Federal Receipts (Dividends, Interest, etc.)		
18.	Transfers from Non-Federal and Levin Funds	levender-konstituenderstituen	had a described and the second s
-	(a) Non-Federal Account	ร้อาวุลสร้างและสัมษาครั้งการเริ่มการเริ่มเกราะในกระสร้ายกลารในกระสร้างการเป็นกระสร้	ไปเราะสะปังหาระหวัดจากเป็นกระหว่างของสำนวนกระปังหาระหวัดสามาร์ได้สามาระดัง เ
	(from Schedule H3)	DLD	BD BD
		lane familie in the sector of	ไม่สามารถในการสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถ และการสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามารถสามา
	(b) Levin Funds (from Schedule H5)	, d. UO	A A A A A A A A A A A A A A A A A A A
	(c) Total Transfers (add 18(a) and 18(b)).	idon	(X ()
		l <del>adadada (kaladada (kalada</del> )	Later in the the the second se
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))►	£.00	<u> </u>
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)►	Ling in P.OD	Per Per

1 1

> L FE6AN026

## DETAILED SUMMARY PAGE

of Disbursements

### Page 4

#### 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 .....

FEC Form 3X (Rev. 02/2003)

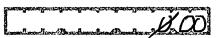
**II. Disbursements** 

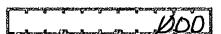
- (ii) Non-Federal Share.....
- (b) Other Federal Operating
- (add 21(a)(i), (a)(ii), and (b)) ...... ▶ 22. Transfers to Affiliated/Other Flarty
- Committeee..... 23. Contributions to Federal Candidates/Committees and Othar Political Committees.....
- 26. Loan Repayments Mede.....
- - (a) Individuals/Persons Other Than Political Committees .....
  - (b) Political Party Committees .....
  - (c) Other Political Committees (such as PACs).....
  - (d) Total Contribution Refunds(add Lines 28(a), (b), and (c))......
- 29. Other Disbursements .....
- 30. Federal Election Activity (2 U.S.C. §431(20))
  - (a) Allocated Federal Election Activity
     (from Schedule H6)
     (i) Federal Share ......
  - (ii) "Levin" Share......(b) Federal Election Activity Paid Entirely
- 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))...

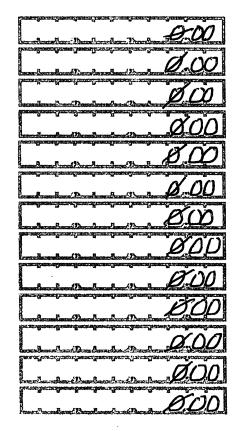
FE6AN026

Carameric C	San	A CALL AND A
l	han the state	, <i>Q</i> .00
		Ø UD
		$\alpha$
	and	$\alpha \cap \alpha$
		Ø OD
		, Ø.OD
		, Ø.DD
	<u></u>	
		<i>Ø.D.</i> D
	and the second	
(Arrent of the second		
	L <u></u>	
neutricini)	L <u></u>	$\beta$ $D$ $\beta$ $D$
ienses	lan da sé Disa lamata jan nganagan garaga lan da sé Disa lan sé	$\beta$ $D$ $\beta$ $D$

 		nagaa 				Ø.ÚD
 						Ø.BO
 	-4234			-123-	~	BOD
~~~~~~	and for the second		-	an gan		ØDO

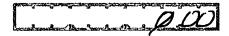


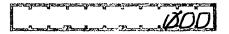












M 80

## **DETAILED SUMMARY PAGE**

of Disbursements

	FEC Form 3X (Rev. 02/2003)		Page 5
	Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	Û.OO	ØOU
34.	Total Contribution Refunds (from Line 28(d))	Ø00	Ø.UO
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	BOD	E.CO
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	đ.D	d00
37.	Offsots to Operating Expenditures (frem Line 15, page 3)	ØCO	dio
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	l	E.O.

.

FE6AN026

•

	٩			
SC	HEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 6 OF 15
IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
•••			Detailed Summary Page	
	idemetics estication such Departs and Ok			
or	y information copied from such Reports and Sta for commercial purposes, other than using the	name and a	ddress of any political committee	to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$				
K.	NAPA COUNTY REP	UBUK	.FIN CENTRAL (	JMMITIEE
Α.	Full Name (Last, First, Middle Initial)			Date of Receipt
~.	Mailing Address		· · · · · · · · · · · · · · · · · · ·	
	City	State	Zip Code	
				Amount of Each Receipt this Period
	FEC ID number of contributing	C	an de son d'a ser d'a s	งวิณาระ มันทรงครั้ง และสมบัตร และ เป็นของ เป็นหลาย เป็นหลาย ได้ เหลาะ ในการสาวานได้ เมาะ เป็นสะเหล่า ในการ มันทรงครั้ง และสมบัตร และ เป็นหลาย เป็นหลาย เป็นหลาย ได้ เหลาะ ได้ เมาะ เป็น เมาะ เป็นสะเหลาะ เป็นสะเหลาะ
	tederal political committee.		- Arman I	Economic Constant Constant Constant Constant Constant Constant Constant Constant
	Name of Employer	Occupation		-
				4
	Receipt For:		Year-to-Date V	
	Other (specify) ▼			
		Same Barne Grav	n Danskanskand Darcherskand Charlen	
	Full Name (Last, First, Middle Initial)	$\overline{1}$		
В.		-	· · ·	Date of Receipt
	Mailing Address	Y	1.	
	City	State	Code	- Investment formulation have been been
				Amount of Each Receipt this Period
	FEC ID number of contributing		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	ร้างการรัฐงารสร้างสารก็จะการก็จะการก็จะสารก็จะสารก็สารสร้างสารก็สารสร้างสารก็สารสร้าง เรื่องสารก็ร้างการก็สารสร้างการก็จะการก็จะสารก็สารสร้างสารก็สารสร้างสารก็สารสร้างสารก็สารสร้างสารก็สา
	federal political committee.		ana and a second and a second as a second as	นี้สาวและมีสาวสาวสมันสาวสาวไม้สาวสาวสี่สาวและสาวไรการสาวไรการสน้าและสาวไม้สาวสาวสี่สาวและสนี้สาวและส
	Name of Employer	Occupation		-
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General		andaerool have subtroviation with the other subtrove from a	
	Other (specify) w		Annatae at an description of the sector of t	
	Full Name (Last, First, Middle Initial)			
C.				Date of Receipt
	Mailing Address			MANY , DAR , LARARA
	City	State	Zip Code	- Insertions Newsters Insertional Insertions
	City	Oldib		Amount of Each Receipt this Period
	FEC ID number of contributing		ระจะเริ่มและรู้แกะหรู้แกะหรู้แกะหรู้	Secondar california from Secondar Contraction and Contraction of C
	federal political committee.	CI,	- A	and the second
	Name of Employer	Occupation		
		Occupation	1	
	Receipt For:		Year-to-Date ▼	$+$ $\mathbf{N}$
	Primary General			
	Other (specify) 🔻		n Bardan i Bardar i Bardar (Nordan)	
			ana ao mandritra dia kaominina dia kaominina dia kaominina dia kaominina dia kaominina dia kaominina dia kaomini	
				Nan
Ľ	UBTOTAL of Receipts This Page (optional)			
ר	OTAL This Period (last page this line number o	only)	•••••••	000

:

٠

, 1

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

ì

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE OF 5
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	210	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may not be sold or used ame and address of any political	by any perso committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
		ni na	
Full Name (Last, First, Middle Initial)	<u>BLICAN CENTRA</u>	<u>H. LU</u>	
A.			Date of Disbursement
Mailing eddress			
City	State Zip Code		
Purpose of Disbursement		-	
			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	รางการรัฐสามารรฐรรมสามารรฐรรมสามาร์สามารรฐรรมสามารรฐรรมสามารรฐรรมสามารรฐรรมสามารรฐรรมสามารรฐรรมสามารรฐรรมสามาร
Office Sought: House Disburs	ement For:	1300	ในของประการที่สามาร์ 7 มีมายเป็นของสัมเทร์ 7 ใหม่อย่างเราะโทยสมัติ <b>ในการที่สามาร์</b>
Senate President	Primary General		
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)	1.		
В.	- Kr		Date of Disbursement
Mailing Address			
City	State Zlp Code		
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
Senate	ement For: Primary General	$\overline{\ }$	
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			<u></u>
C			Date of Disbursement
Mailing Address			here the second se
City	State Zip Code		
Purpose of Disbursement		and the second	
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburs Senate President	sement For: Primary General Other (specify) ▼	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
State: District:	aal		
SUBTOTAL of Disbursements This Page (optional TOTAL This Period (last page this line number on			
TO ME THIS FOROU (LASE PAGE THE HITE HURDER OF	'7/	▶	Sandhandhard Sanda with a San San San San

•

٠

; ,

# SCHEDULE C (FEC Form 3X) LOANS

OANS	Use separate schedule(s) PAGE S OF S OF S OF D OF D OF D OF D OF D OF
NAME OF COMMITTEE (In Full)	
NAPA COUNTY REPUTALICAN COAN SOURCE Full Name (Last, First, Middle Initial)	CENTRAL COMMITTEE
OAN SOURCE Full Name (Last, First, Middle Initial)	Election: Primary General
Mailing Address	Other (specify)
City State ZIP Cod	
Original Amount of Loan Cumulative Payment To	
and and the street of the stre	landered herden and searcher & Breakerst Developed Second Developed S
	Interest Rate Secured:
	% (apr) Yes No
List All Endorsers or Guarantors (N any) to Loan Source	
1. Full Name (Last, First, Middle Initia)	Name of Employer
Mailing Address	Occupation
City State ZIP Oode	Amount Guaranteed
	Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Character and the second secon
	Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount press and
City State ZIP Code	Guaranteed Outstanding: coordinations that the three the standard three the standards
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount เกิดสารการการการการการการการการการการการการกา
City State ZIP Code	Guaranteed Outstanding:
	here of nearly nearly and to we farme be surface of the further and the nearly and
SUBTOTALS This Period This Page (optional)	
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If	no Schedule D, carry forward to appropriate line of Summary.

-

ja:	
SCHEDULE C-1	(FEC Form 3X)
LOANS AND LIN	ES OF CREDIT FROM LENDING INSTITUTIONS

9 OF 15 Supplementary for Information found on Page \_\_\_\_ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
NAPA COUNTY REPUBLICAN	<u>CENTRAL COMMITT</u>	
	Amount of Loan	Interest Rate (APR)
FDN Name		
	Some Suma Law Brown Suma Suma Barrel Suma	water and the second se
Mailing Address		
City State Zip Code	Date Incurred or Established	- Way / Deg / Maker
		Instand Instand Instantion
A. Has loan been restructured?	If yes, date originally incurre	d (Ward / Dard / Ward / Ward
B. If line of credit, Amount of this Draw:	Balance:	
C. Are other parties secondarily liable for the debt incu No Yes (Endorsers and guarantors	rred? must be reported on Schedule C.	)
<ul> <li>D. Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates stocks, accounts receivable, cash on deposit, or other the property.</li> <li>No Yes If yes, specify:</li> </ul>	of deposit, chattel papers,	What is the value of this collateral?
	4	Does the lender have a perfected security
		Interest in it? No Yes
E. Are any future contributions or future receipts of int collateral for the loan? No Yes If yes	erect income, pledged as	What is the estimated value?
	<b>\</b>	anna hann da an 19 ann ha an t-ann i Dàrain ha an t-Barra Sanad
A depository account must be established pursuant to 11 CFR 100.82(a)(2) and 100.142(e)(2).	Location of account:	
Date account established:	Address:	
	City, State, Zip:	
F. If neither of the types of collateral described above the loan amount, state the basis upon which this lo	was pledged for this loan, on if the an was made and the basis on w	amount pledged does not equal or exceed hich it assures repayment.
G. COMMITTEE TREASURER		DATE
Typed Name		
Signature	•	
H. Attach a signed copy of the loan agreement.		
I. TO BE SIBNED BY THE LENDING INSTITUTION I. To the best of this institution's knowledge, the are accurate as stated above.		mation regarding the extension of the loan
<ul> <li>II. The loan was made on terms and conditions similar extensions of credit to other borrowers</li> <li>III. This institution is aware of the requirement the complied with the requirements set forto at 11</li> </ul>	of comparable credit worthiness. at a loan must be made on a bas	is which assures repayment, and has
AUTHORIZED REPRESENTATIVE		DATE
Typed Name		NUT IN COSCI & CARA
Signature	Title	

.

.

i

¢¢

.

· 1

CHEDULE D (FEC Form 3X)		(Use separate	PAGE 10 OF 15
EBTS AND OBLIGATIONS		schedule(s) for each	FOR LINE NUMBER: (check only one)
cluding Loans		numbered line)	
AME OF COMMITTEE (In Full)			
NAPA COUNTY REPUBLICA	N CENTRAL I	COMMITTO	EE
A. Full Name (Last, First, Middle Initial) of Debtor or Cr	editor		Debt (Purpose):
Mailing Address	······		<i>.</i> *
City State Zij	o Code		
Outstanding Balance Beginning This Period		1	
Construction of the second sec			
and the second the second s	<b>_</b>		
Amount Incurred This Period	Payment This Period		ing Balance at Close of This Period
	netwood Darmalion and Star - One - Star - Star		and Daviden of the of t
B. Full Name (Last, First, Middle Initial) of Debtor or Cre	editor	Nature of	Debt (Purpose):
Mailing Address			
City State Vi	p Code		
		I	
Outstanding Balance Beginning This Period	10		
and a second	K		
Amount Incurred This Period	Paymen This Period		ling Balance at Close of This Period
	for the stand of the stand		anna fanna a san anna fan an anna anna a
C. Full Name (Last, First, Middle Initial) of Debtor or C			Debt (Purpose):
Mailing Address		$\mathbf{X}$	
City Sta	ate Zip Code		
Outstanding Balance Beginning This Period			
an and the set of Barrel Description of Barrellound Accessibility of Access			N Contraction of the second se
Amount Incurred This Period	Payment This Period		ling Balance at Close of This Perio
ราวการใหม่มาใหมด 1/112 ตรีสาวการให้การเป็นการเป็นสาวกรีโลกการในการเป็นหลายรู้และหลังสาวกรีโลก			โดงรายมี:: ) แปลระหวิจงอาย์ ระหระหัวรายามีการเห <del>รือสามมีเหตุมา</del> มี <del>เหตุมา</del> มีเหตุมา
handa sharfina bardan Dunha di ang barda a sharfina da sa	nden 6 Daade verdaard Daaden afwerde vij	Senfred Inchase	for the for the former of the
) CIIDTOTALS This Deviad This Deve (antione)			<mark>den en den ser </mark>
) SUBTOTALS This Period This Page (optional)			terre i Norado and a sector i da and a Sector per sector per s
) TOTALS This Period (last page this line number only).		<b>&gt;</b>	hand the stand of the state of
N TOTAL OUTSTANDING LOANS for Schodule O for			an alamada sa kasa di sa di
3) TOTAL OUTSTANDING LOANS from Schedule C (las	· page only)		
) ADD 2) and 3) and carry forward to apprepriate line o	f Summary Page (last page c	only) 🕨	and the second

.

р - 4

SCHEDULE E (FEC Form 3X)	·
ITEMIZED INDEPENDENT EXPENDITURES	PAGE 1 OF 15 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER V
NAPA COUNTY REPUBLICAN CENTRAL C	omm. CO04.55659
Check if 24-hour report 48-hour report New report Amends repor	
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	
	Amount
City State Zip Code	8
	lanationalism Time transferritionalism time time term
Purpose of Expenditure Category/ Type	Office Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	Issuetuneal Issuetuneal Issuetuneatimese
V.	Amount
City State Tip Code	and and the set of the
Purpose of Expenditure Categor/	Office Sought: House State: Senate District:
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General
(a) SUBTOTAL of Itemized Independent Expenditures	
	Land the state of
(b) SUBTOTAL of Uniternized Independent Expenditures	
(c) TOTAL Independent Expenditures.	
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent o party committee) any political party committee or its agent.	
with, or at the request or suggestion of, any candidate or authorized committee or agent o	of either, or (if the reporting entity is not a political

...

13031054690

١

1....

ī

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

CHEDULE F (FEC Form 3X)			
EMIZED COORDINATED PARTY E			
N BEHALF OF CANDIDATES FOR			PAGE 12 OF 15
	ed only by Political Committees in the Gene	eral Election)	FOR LINE 25 OF FORM 3X
IAME OF COMMITTEE (In Full)	TUBLICAN CENTRA	CAMIN	ITTEE
las your committee been designated to make	Full Name of Subordinate Committee		///
cordinated expenditures by a political party comr			
f YEB, name the designating committee:	Mailing Address		
	City	State	a ZIP Code
Full Name (Last, First, Middle Initial) of Each	Pavee	Purpose of Exper	nditure grangestagestagestagestage
Mailing Address		-	Category/ Type
City	State Zip Code	Date	
Name of Federal Candidate Supported Offic	e Sought: House State: Senate District:	Amount	
	Presidential		Sunday State
Aggregate General Election	Larmon Hanne and Larmon Annual and Annual		
Full Name (Last, First, Middle initial) of Each	hadhadhadhadhadhadhadhadhadhadhadhadhadh	Purpose of Exper	
Full Name (Last, First, Middle Initial) of Each			
Mailing Address	You,	-	Category/ Type
	- Vr	Date	
City	State Zip Code	- <b>Мандар</b> / Б	A A A A A A A A A A A A A A A A A A A
Name of Federal Candidate Supported Offic	e Sought: House State:	Amount	
	Senate District: Presidentia		
Aggregate General Election	hannad so with some data made an and a some data and a some data and a some and	- Ensuration and Some Street	niteen feren Denniterentissen Streen den sed
Expenditure for this Candidate	land Dente and the state of the		
Full Name (Last, First, Middle Initial) of Each	Payee	Purpose of Expe	nditure
			Category/
Mailing Address		Date	Туре
City	State Zip Code	1 mg / r	To voverate
Name of Federal Candidate Supported Offic	ce Sought: House j State:	Amount	
	Senate District:		fan generatien af an arte and an arte and an arte and an arte and a star and a star and a star and a star and a
Aggregate General Election		-	and man and
Expenditure for this Candidate	Annal Manuferrar Conserts Monar Franciscus Science Sciences		$\sim$
			a diserant have been a diserant for some for some die so
SUBTOTAL of Expenditures This Page (optional	)		
TOTAL This Period (last page this line number	only) 🕨	leradonalization like	where the street stre

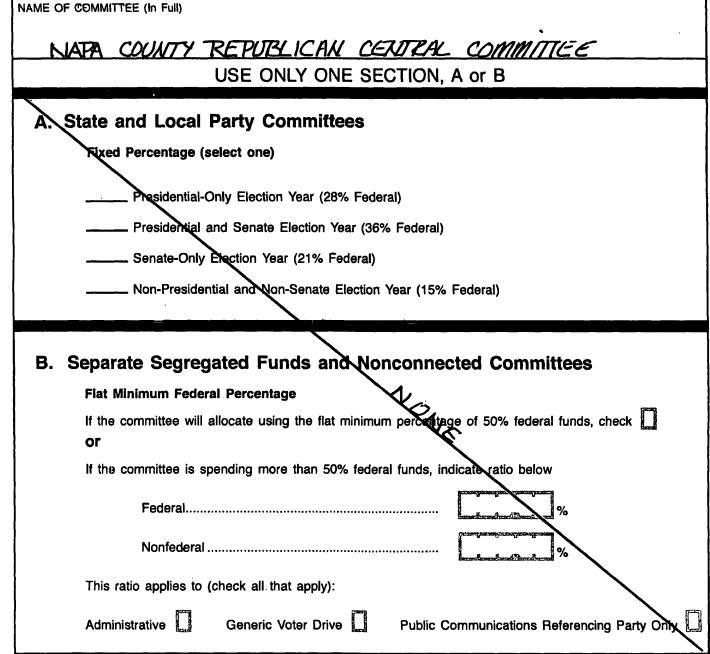
FEC Schedule F (Form 3X) Rev. 02/2009

ł

## SCHEDULE H1 (FEC Form 3X)

## METHOD OF ALLOCATION FOR:

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



~] 0

5 4 6

0

M M

proved

ALLOCATION RATIOS		14 1
AJAPA COLINTY PEPUTSLICAN CENT RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDI		IEE
ACTIVITIES APPEARING ON THIS REPORT.		
Methods of allocation:		
<ol> <li>FUNDRAISING activities are allocated using the "funds received n expenses must equal the federal proportion of monies raised.</li> </ol>	nethod" where the federal p	roportion of
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated a where the federal proportion of disbursements is based on the be tivity. For PACS Only: Direct candidate support includes public co	nefit derived by federal can mmuntcations er voter drive	didates from the ac-
federal and nonfederal candidates, regardlese of whether there is are allocated using a time/space method.	a reference to e politieal pa	urty. Such expenses
	a reference to e politieal pa	arty. Such expenses
are allocated using a time/space method.	a reference to e politieal pa	arty. Such expenses
are allocated using a time/space method.	FEDERAL %	arty. Such expenses
are allocated using a time/space method.	- <u></u>	arty. Such expenses
are allocated using a time/space method.  ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:  Fondraising Direct Candidate Support	FEDERAL %	arty. Such expenses
are allocated using a time/space method.  ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:  Foodraising Direct Candidate Support CHECK IF THE RATIO IS:	FEDERAL %	arty. Such expenses
are allocated using a time/space method.  ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:  Fondraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported  ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %
are allocated using a time/space method.  ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:  Fondraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL 9

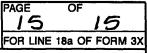
New Revised Same as Previously Reported		
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:  Fundraising CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:  Fundraising Direct Candidate Support CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:  Fundraising Direct Candidate Support CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:  Fundraising Direct Candidate Support CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS:  Fundraising Direct Candidate Support CHECK IF THE RATIO IS:  New Revised Same as Previously Reported	FEDERAL %	NONEEDERAL %

.

.

%

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



NAME OF COMMITTEE (In Full) NAPA LOUNTY REPUBLICAN CENTRAL COMMITTEE. NAME OF ACCOUNT TOTAL AMOUNT TRANSFERRED BREAKDOWN OF TRANSFER RECEIVED Total Administrative ..... I) ii) Generic Voter Drive ili) Exempt Activites..... Iv) Direct Fundraising (List Activity or Event Identifier) a) b) c) Total Amount Transferred For Direct Foodraising ..... v) Direct Candidate Support (List Activity or Event Identifier) a) \_\_\_ b)\_\_\_\_ c) Total Amount Transferred For Direct Candidate Support..... vi) Public Communications Referring Only to Party (Made by PAC) TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED TOTAL This Period (Administrative) TOTAL This Period (Generic Voter Drive) TOTAL This Period (Exempt Activities) ..... TOTAL This Period (Direct Fundraising) TOTAL This Period (Direct Candidate Support) TOTAL This Period (Public Communications Referring Only to Party) TOTAL This Period (Total Amount Transferred).....

51

FEC Schedule H3 (Form 3X) Rev. 12/2004

Federal Election Commission         ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS         The FEC added this page to the end of this filing to indicate how it was received.         Date of Receipt         Hand Delivered       Date of Receipt         USPS First Class Mail       Postmarked         USPS Registered/Certified       4/9/1>
Hand Delivered Postmarked USPS First Class Mail Postmarked (R/C)
USPS First Class Mail Postmarked (R/C)
Postmarked USPS Priority Mail
Delivery Confirmation <sup>™</sup> or Signature Confirmation <sup>™</sup> Label
Postmarked USPS Express Mail
Postmark Illegible
No Postmark
Shipping Date Overnight Delivery Service (Specify):
Next Business Day Delivery
Date of Receipt Received from House Records & Registration Office
Date of Receipt Received from Senate Public Records Office
Date of Receipt Date of Receipt
Date of Receipt or Postmarked Other (Specify):