

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
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Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

11th Congressional District Republican Party

ADDRESS (number and street)

P.O. BOX 1963



Check if different than previously reported. (ACC)

Bryson City

N.C.

28713

1963

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00165142

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

☐ Primary (12P)



General (12G)



Runoff (12R)

Report for the:



Convention (12C)



Special (12S)

Election on

MM / DD /

MM / DD /

MM / DD /

in the State of

MM / DD /

(d) 30-Day

POST-Election



General (30G)



Runoff (30R)



Special (30S)

Report for the:

Election on

MM / DD /

MM / DD /

MM / DD /

in the State of

MM / DD /

5. Covering Period

MM / DD / YYYY
1 0 / 0 1 / 2 0 1 5

MM / DD / YYYY
0 1 / 0 1 / 2 0 1 5

MM / DD / YYYY
2 0 1 5 / 0 1 / 2 0 1 5

through

MM / DD / YYYY
1 2 / 3 1 / 2 0 1 5

MM / DD / YYYY
3 1 / 0 1 / 2 0 1 5

MM / DD / YYYY
2 0 1 5 / 0 1 / 2 0 1 5

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 Linda G. Dahl

Signature of Treasurer

Linda G. Dahl

Date

MM / DD / YYYY
0 1 / 2 5 / 2 0 1 6

MM / DD / YYYY
2 5 / 0 1 / 2 0 1 6

MM / DD / YYYY
2 0 1 6 / 0 1 / 2 0 1 6

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

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

11th Congressional District Republican Party

Report Covering the Period: From:

M	M
1	0

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	1	5

 To:

M	M
1	2

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	1	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,	Y Y Y Y 2 0 1 5	1, 8 5 8 0 7
(b) Cash on Hand at Beginning of Reporting Period.....	3, 5 6 3 3 1	
(c) Total Receipts (from Line 19)	0 0 0	3, 6 6 5 0 0
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3, 5 6 3 3 1	5, 5 2 3 0 7
7. Total Disbursements (from Line 31)	3 2 7 6 0	2, 2 8 7 3 6
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3, 2 3 5 7 1	3, 2 3 5 7 1
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

☐ 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

11th Congressional District Republican Party

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 1 0 / 0 1 / 2 0 1 5 To: ^{M M / D D / Y Y Y Y} 1 2 / 3 1 / 2 0 1 5

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

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	3 2 7 6 0	1 9 5 8 7 6
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3 2 7 6 0	1 9 5 8 7 6
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(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 (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3 2 7 6 0	1 9 5 8 7 6
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	3 2 7 6 0	1 9 5 8 7 6

DETAILED SUMMARY PAGE of Disbursements

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Page 5

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

0 0 0 0
0 0 0 0
0 0 0 0

0 0 0 0
0 0 0 0
0 0 0 0

2010-01-01 00:00:00

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)

PAGE 1 OF 1

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

11th Congressional District Republican Party

Full Name (Last, First, Middle Initial)

A. Dahl, Linda G		Date of Disbursement MM / DD / YYYY 10 / 13 / 2015	
Mailing Address PO Box 38			
City Bakersville	State NC	Zip Code 28705	
Purpose of Disbursement Repayment for Federal and State Mailings		001	Amount of Each Disbursement this Period 2760
Candidate Name		Category/ Type	
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:		

B. Full Name (Last, First, Middle Initial) GOP North Carolina		Date of Disbursement MM / DD / YYYY 10 / 22 / 2015	
Mailing Address PO Box 12905			
City Raleigh	State NC	Zip Code 27605	
Purpose of Disbursement District Hall of Fame Dinner for Nominees		007	Amount of Each Disbursement this Period 30000
Candidate Name		Category/ Type	
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:		

C. Full Name (Last, First, Middle Initial)		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
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:		

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

32760

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

32760

Dahl
P.O. Box 38
Bakersville, NC 28705


7015 0640 0001 3250 0532

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

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F. CENTER

3 AM 11:38

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.

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<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 1/26/16
<input type="checkbox"/> USPS Priority Mail	Postmarked
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<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
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	2/3/16 DATE PREPARED

(3/2015)

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