

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL CENTER
2017 FEB -9 AM 11:58

Office Use Only

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

MODERN REPUBLICAN WOMEN

ADDRESS (number and street) 732 EDEN WAY N.

Check if different than previously reported. (ACC) 5 4 2 S U I T E E
C H E S A P E A K E V A 2 3 3 2 0

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 00558379

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 M M / D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

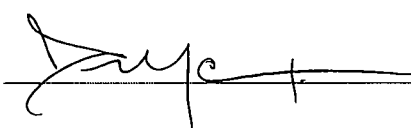
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 1 1 / 29 / 2016 through M M / D D / Y Y Y Y Y Y 1 2 / 3 1 / 2 0 1 6

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 DACIA MARXRIESER

Signature of Treasurer



Date

M M / D D / Y Y Y Y Y Y 0 2 / 0 6 / 2 0 1 7

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. 05/2016

2017-02-09 11:00:14

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

MODERN REPUBLICAN WOMEN

Report Covering the Period: From:

MM	DD	YYYY
11	29	2016

 To:

MM	DD	YYYY
12	31	2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date			
6. (a) Cash on Hand January 1, <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>YYYYYY</td></tr><tr><td>2016</td></tr></table>	YYYYYY	2016		<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>2372.71</td></tr></table>	2372.71
YYYYYY					
2016					
2372.71					
(b) Cash on Hand at Beginning of Reporting Period.....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>1620.12</td></tr></table>	1620.12			
1620.12					
(c) Total Receipts (from Line 19).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>2015.00</td></tr></table>	2015.00	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>3967.31</td></tr></table>	3967.31	
2015.00					
3967.31					
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>3635.12</td></tr></table>	3635.12	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>6340.02</td></tr></table>	6340.02	
3635.12					
6340.02					
7. Total Disbursements (from Line 31).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>2328.32</td></tr></table>	2328.32	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>5033.22</td></tr></table>	5033.22	
2328.32					
5033.22					
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>1306.80</td></tr></table>	1306.80	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>1306.80</td></tr></table>	1306.80	
1306.80					
1306.80					
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>0.00</td></tr></table>	0.00			
0.00					
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>0.00</td></tr></table>	0.00			
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

2016-12-31 10:00 AM

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

MODERN REPUBLICAN WOMEN

Report Covering the Period: From:

MM / DD / YYYY
11 / 29 / 2016

To:

MM / DD / YYYY
12 / 31 / 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).....

1065.00

1575.00

(ii) Unitemized.....

950.00

2392.31

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

2015.00

3967.31

(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).....▶

2015.00

3967.31

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)).....▶

2015.00

3967.31

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

2015.00

3967.31

NON-FEDERAL CONTRIBUTIONS

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)	2015.00	3967.31
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2015.00	3967.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2328.32	5033.22
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2328.32	5033.22

NON-PROFIT CORPORATION

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 1 OF 2	
	<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)
MODERN REPUBLICAN WOMEN

A. Matheson, Dawn
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address
1049 Shoal Creek Trail

City **Chesapeake** State **VA** Zip Code **23320**

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

Name of Employer (for Individual) **Matheson Group** Occupation (for Individual) **MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt
12 / 13 / 2016

Amount of Each Receipt this Period
315.00

Memo Item

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

Mailing Address
1302 Greens Edge Court

City **Chesapeake** State **VA** Zip Code **23320**

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 ▼
350.00

Date of Receipt
12 / 13 / 2016

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address
4036 E. Ocean View Ave.

City **Norfolk** State **VA** Zip Code **23518**

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

Name of Employer (for Individual) **KB Crawford Consulting** Occupation (for Individual) **CONSULTANT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 13 / 2016

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **815.00**

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

2017-01-05 10:00 AM

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 2 OF 2

(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)

MODERN REPUBLICAN WOMEN

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

A. Cosgrove, Sue

Mailing Address

301 Castle Forbes Way

City

Chesapeake

State

VA

Zip Code

23322

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

U S A A

Occupation (for Individual)

ADJUSTER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 13 / 2016

Amount of Each Receipt this Period

250.00

Memo Item

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

B.

Mailing Address

City

State

Zip Code

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

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

C.

Mailing Address

City

State

Zip Code

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).....▶

250.00

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

1065.00

NON-FUNCTIONING

**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 2
	<input checked="" type="checkbox"/> 21b 28a	<input type="checkbox"/> 22 28b	<input type="checkbox"/> 23 28c	<input type="checkbox"/> 26 29	<input type="checkbox"/> 27 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)
MODERN REPUBLICAN WOMEN

A. Full Name (Last, First, Middle Initial)
Mermaid Winery

Mailing Address
330 W 22nd St.

City **Norfolk** State **VA** Zip Code **23517**

Purpose of Disbursement
Event / Site Fee 003
Category/Type

Candidate Name

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

State: District:

Date of Disbursement
MM / DD / YYYY
12 / 13 / 2016

FEC Identification Number
C

Amount of Each Disbursement this Period
1331.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Robin Short Jewelry

Mailing Address
1047 Shoal Creek Trail

City **Chesapeake** State **VA** Zip Code **23320**

Purpose of Disbursement
Event / Entertainment 003
Category/Type

Candidate Name

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

State: District:

Date of Disbursement
MM / DD / YYYY
12 / 13 / 2016

FEC Identification Number
C

Amount of Each Disbursement this Period
700.00

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ **2031.00**

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

2017-01-09 09:01:00 AM

**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 2 OF 2
	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 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)
MODERN REPUBLICAN WOMEN

A. Full Name (Last, First, Middle Initial)
CRFV LEADS

Date of Disbursement
12 / 14 / 2016

Mailing Address
7204 Oriole Ave.

City: Springfield State: VA Zip Code: 22150

Purpose of Disbursement: Donation / Local
Candidate Name: []
FEC Identification Number: C []
Amount of Each Disbursement this Period: 250.00
Category/Type: 011

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) Memo Item

State: District:

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

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement
Candidate Name
FEC Identification Number: C []
Amount of Each Disbursement this Period
Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) Memo Item

State: District:

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

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement
Candidate Name
FEC Identification Number: C []
Amount of Each Disbursement this Period
Category/Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) Memo Item

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶ 250.00

TOTAL This Period (last page this line number only) ▶ 2281.00

2017-02-09 PM 00:10:11

100% Recycled fiber
80% Post-Consumer

RECEIVED
EC MAIL CENTER
2017 FEB -9 AM 11:58

Call 1-800-PICK-UPS® (1-800-742-5877) or visit UPS.com®

For UPS Next Day Air services, there is no weight limit for envelopes containing letters, business correspondence, urgent documents, and electronic media. When a UPS Next Day Air service is selected, UPS Express Envelopes containing items other than those listed above are subject to the corresponding service restrictions.

0.5 LBS LTR 1 OF 1

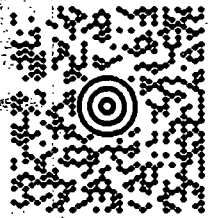
For UPS Weights may be used There is no I can enclose

For UPS 2nd weighing on correspondi

Do not send

FROM:
MRW PAC
732 EDEN WAY N.
CHESAPEAKE VA 23320

SHIP TO:
FEC
999 E STREET, NW
WASHINGTON DC 20463



MD 201 9-83

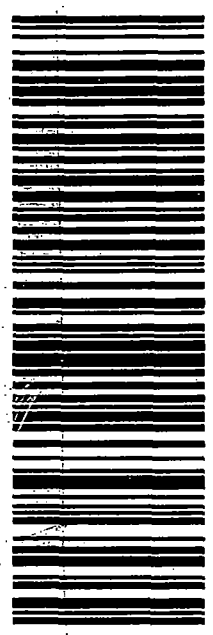
Expedited

Do not use this envelope for:

- UPS Ground
- UPS Standard
- UPS 3 Day Select®

UPS 2ND DAY AIR
TRACKING #: 1Z 639 2AW 02 4541 8870

2



BILLING: P/P

Fold here and place in label pocket

WS 15.0.16 Brother HL-54 81.0A 10/2016

International Shipping Notice — Carriage hereunder may be subject to the rules relating to liability and other terms and/or conditions established by the Convention for the Unification of Certain Rules Relating to International Carriage by Air (the "Warsaw Convention") and/or the Convention for the International Carriage of Goods by Road (the "CMR Convention"). These commodities, technology or software were exported from the U.S. in accordance with the Export Administration Regulations. Diversion contrary to U.S. law prohibited.

010195101 05/05 PAC United Parcel Service, Louisv

NON-CONFIDENTIAL

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked Date of Receipt

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark


Overnight Delivery Service (Specify): **UPS** Shipping Date
2/8/17
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

PREPARER  **2/9/17**
DATE PREPARED

2017-01-09 10:00:00 AM