

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.

NEW REPUBLICAN PAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Collins, Gentry, , ,

Type or Print Name of Treasurer

Signature of Treasurer *Collins, Gentry, , ,* [Electronically Filed] Date / /

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								
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

NEW REPUBLICAN PAC

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="2020"/>		169317.44
(b) Cash on Hand at Beginning of Reporting Period.....	169317.44	
(c) Total Receipts (from Line 19)	75.00	75.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	169392.44	169392.44
7. Total Disbursements (from Line 31).....	159135.42	159135.42
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	10257.02	10257.02
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	41050.84	

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

NEW REPUBLICAN PAC

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).....	0.00	0.00
(ii) Unitemized	75.00	75.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	75.00	75.00
(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)	75.00	75.00
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)).....▶	75.00	75.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	75.00	75.00

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
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).....	159135.42	159135.42
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)) ..	159135.42	159135.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	159135.42	159135.42

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)	75.00	75.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	75.00	75.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 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)
NEW REPUBLICAN PAC

A. HOLTZMAN VOGEL

Full Name (Last, First, Middle Initial)

Mailing Address 45 NORTH HILL DRIVE
STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 07 / 2020

FEC Identification Number: C [REDACTED]
Transaction ID : SB29.4319
Amount of Each Disbursement this Period: 1428.75

Memo Item

B. HOLTZMAN VOGEL

Full Name (Last, First, Middle Initial)

Mailing Address 45 NORTH HILL DRIVE
STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 07 / 2020

FEC Identification Number: C [REDACTED]
Transaction ID : SB29.4320
Amount of Each Disbursement this Period: 3131.25

Memo Item

C. HOLTZMAN VOGEL

Full Name (Last, First, Middle Initial)

Mailing Address 45 NORTH HILL DRIVE
STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 07 / 2020

FEC Identification Number: C [REDACTED]
Transaction ID : SB29.4321
Amount of Each Disbursement this Period: 1676.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6236.25

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 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

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NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. HOLTZMAN VOGEL

Full Name (Last, First, Middle Initial)

Mailing Address 45 NORTH HILL DRIVE
STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 02 / 07 / 2020

FEC Identification Number: C
Transaction ID : SB29.4322
Amount of Each Disbursement this Period: 1976.25

Memo Item

B. NEW REPUBLICAN, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement 004 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 03 / 24 / 2020

FEC Identification Number: C
Transaction ID : SB29.4291
Amount of Each Disbursement this Period: 18012.93

Memo Item

C. NEW REPUBLICAN, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement 002 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 03 / 24 / 2020

FEC Identification Number: C
Transaction ID : SB29.4292
Amount of Each Disbursement this Period: 3769.58

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 23758.76

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 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

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NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. NEW REPUBLICAN, LLC		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020	
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB29.4293 Amount of Each Disbursement this Period 2248.68	
City ALEXANDRIA	State VA	Zip Code 22314	Category/ Type 002
Purpose of Disbursement		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. NEW REPUBLICAN, LLC		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020	
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB29.4294 Amount of Each Disbursement this Period 2117.29	
City ALEXANDRIA	State VA	Zip Code 22314	Category/ Type 004
Purpose of Disbursement		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. NEW REPUBLICAN, LLC		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020	
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB29.4295 Amount of Each Disbursement this Period 904.12	
City ALEXANDRIA	State VA	Zip Code 22314	Category/ Type 004
Purpose of Disbursement		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).....▶	5270.09
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 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

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NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. NEW REPUBLICAN, LLC

Full Name (Last, First, Middle Initial)
Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement 002 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 03 / 24 / 2020

FEC Identification Number: C
Transaction ID : SB29.4296
Amount of Each Disbursement this Period: 2640.03

Memo Item

B. NEW REPUBLICAN, LLC

Full Name (Last, First, Middle Initial)
Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement 004 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 03 / 24 / 2020

FEC Identification Number: C
Transaction ID : SB29.4298
Amount of Each Disbursement this Period: 1352.72

Memo Item

C. NEW REPUBLICAN, LLC

Full Name (Last, First, Middle Initial)
Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement 002 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 03 / 24 / 2020

FEC Identification Number: C
Transaction ID : SB29.4299
Amount of Each Disbursement this Period: 2377.72

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6370.47

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 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

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NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. NEW REPUBLICAN, LLC		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB29.4300 Amount of Each Disbursement this Period [REDACTED] 20833.34
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
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:		

Full Name (Last, First, Middle Initial) B. NEW REPUBLICAN, LLC		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB29.4301 Amount of Each Disbursement this Period [REDACTED] 20833.34
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement	Category/Type 001	
Candidate Name	Memo Item <input type="checkbox"/>	
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:		

Full Name (Last, First, Middle Initial) C. NEW REPUBLICAN, LLC		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB29.4302 Amount of Each Disbursement this Period [REDACTED] 1667.73
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement	Category/Type 002	
Candidate Name	Memo Item <input type="checkbox"/>	
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)..... ▶

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

[REDACTED] 43334.41
[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 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

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NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. NEW REPUBLICAN, LLC		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020	
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB29.4303 Amount of Each Disbursement this Period [REDACTED] 20833.34	
City ALEXANDRIA	State VA	Zip Code 22314	Category/ Type 001
Purpose of Disbursement		Memo Item <input type="checkbox"/>	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. NEW REPUBLICAN, LLC		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020	
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB29.4304 Amount of Each Disbursement this Period [REDACTED] 610.66	
City ALEXANDRIA	State VA	Zip Code 22314	Category/ Type 002
Purpose of Disbursement		Memo Item <input type="checkbox"/>	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. NEW REPUBLICAN, LLC		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020	
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB29.4305 Amount of Each Disbursement this Period [REDACTED] 20833.34	
City ALEXANDRIA	State VA	Zip Code 22314	Category/ Type 001
Purpose of Disbursement		Memo Item <input type="checkbox"/>	
Candidate Name			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

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

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

[REDACTED] 42277.34
[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 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

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NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. NEW REPUBLICAN, LLC

Full Name (Last, First, Middle Initial)
Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement 002 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 03 / 24 / 2020

FEC Identification Number: C
Transaction ID : SB29.4306
Amount of Each Disbursement this Period: 602.16

Memo Item

B. NEW REPUBLICAN, LLC

Full Name (Last, First, Middle Initial)
Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 03 / 24 / 2020

FEC Identification Number: C
Transaction ID : SB29.4307
Amount of Each Disbursement this Period: 20833.34

Memo Item

C. NEW REPUBLICAN, LLC

Full Name (Last, First, Middle Initial)
Mailing Address 815 SLATERS LANE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement 002 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 03 / 24 / 2020

FEC Identification Number: C
Transaction ID : SB29.4308
Amount of Each Disbursement this Period: 341.96

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 21777.46

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 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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. NEW REPUBLICAN, LLC		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB29.4309 Amount of Each Disbursement this Period [REDACTED] 123.76
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement		<input type="checkbox"/> 001 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. NEW REPUBLICAN, LLC		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB29.4310 Amount of Each Disbursement this Period [REDACTED] 2198.24
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement		<input type="checkbox"/> 002 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. NEW REPUBLICAN, LLC		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020
Mailing Address 815 SLATERS LANE		FEC Identification Number C [REDACTED] Transaction ID : SB29.4311 Amount of Each Disbursement this Period [REDACTED] 4420.95
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement		<input type="checkbox"/> 001 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)..... ▶

[REDACTED] 6742.95

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 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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. NEW REPUBLICAN, LLC		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020
Mailing Address 815 SLATERS LANE		FEC Identification Number C Transaction ID : SB29.4312 Amount of Each Disbursement this Period 775.15
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Disbursement 001	Memo Item <input type="checkbox"/>
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. NEW REPUBLICAN, LLC		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020
Mailing Address 815 SLATERS LANE		FEC Identification Number C Transaction ID : SB29.4313 Amount of Each Disbursement this Period 155.00
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Disbursement 001	Memo Item <input type="checkbox"/>
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. NEW REPUBLICAN, LLC		Date of Disbursement MM / DD / YYYY 03 / 24 / 2020
Mailing Address 815 SLATERS LANE		FEC Identification Number C Transaction ID : SB29.4314 Amount of Each Disbursement this Period 2433.70
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Disbursement 004	Memo Item <input type="checkbox"/>
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	3363.85
TOTAL This Period (last page this line number only).....▶	159131.58

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4251**
NEW REPUBLICAN PAC

LOAN SOURCE Full Name (Last, First, Middle Initial) CASTELLANOS, ALEJANDRO, , ,		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 399 NORTH QUAKER LANE			
City ALEXANDRIA	State VA	ZIP Code 22304	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 02 / 03 / 2015	MM / DD / YYYY 12/31/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	20000.00
TOTALS This Period (last page in this line only)	20000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor HOLTZMAN VOGEL			Nature of Debt (Purpose): Legal
Mailing Address 45 NORTH HILL DRIVE STE 100			
City WARRENTON	State VA	Zip Code 20186	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4316	
Amount Incurred This Period 1428.75	Payment This Period 1428.75	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor HOLTZMAN VOGEL			Nature of Debt (Purpose): Legal
Mailing Address 45 NORTH HILL DRIVE STE 100			
City WARRENTON	State VA	Zip Code 20186	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4317	
Amount Incurred This Period 3131.25	Payment This Period 3131.25	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor HOLTZMAN VOGEL			Nature of Debt (Purpose): Legal
Mailing Address 45 NORTH HILL DRIVE STE 100			
City WARRENTON	State VA	Zip Code 20186	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4318	
Amount Incurred This Period 1676.25	Payment This Period 1676.25	Outstanding Balance at Close of This Period 0.00

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 25
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor HOLTZMAN VOGEL			Nature of Debt (Purpose): Legal
Mailing Address 45 NORTH HILL DRIVE STE 100			
City WARRENTON	State VA	Zip Code 20186	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.4315	
Amount Incurred This Period <input type="text" value="1976.25"/>	Payment This Period <input type="text" value="1976.25"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor HOLTZMAN VOGEL			Nature of Debt (Purpose): Legal
Mailing Address 45 NORTH HILL DRIVE STE 100			
City WARRENTON	State VA	Zip Code 20186	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.4323	
Amount Incurred This Period <input type="text" value="217.50"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="217.50"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): PRINTING BOOKLETS
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="18012.93"/>	Transaction ID : SD10.4222	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="18012.93"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="217.50"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 18 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="3769.58"/>	Transaction ID : SD10.4223	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3769.58"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="2248.68"/>	Transaction ID : SD10.4224	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2248.68"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): BOOKLET PRINTING
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="2117.29"/>	Transaction ID : SD10.4225	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2117.29"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 19 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): PRINTING - ADVERTISING/MARKETING BOOKLET
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 904.12	Transaction ID : SD10.4226	
Amount Incurred This Period 0.00	Payment This Period 904.12	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 2640.03	Transaction ID : SD10.4227	
Amount Incurred This Period 0.00	Payment This Period 2640.03	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): MARKETING BOOKS
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 1352.72	Transaction ID : SD10.4228	
Amount Incurred This Period 0.00	Payment This Period 1352.72	Outstanding Balance at Close of This Period 0.00

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 2377.72	Transaction ID : SD10.4229	
Amount Incurred This Period 0.00	Payment This Period 2377.72	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING - JANUARY
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 20833.34	Transaction ID : SD10.4230	
Amount Incurred This Period 0.00	Payment This Period 20833.34	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING FEBRUARY
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 20833.34	Transaction ID : SD10.4231	
Amount Incurred This Period 0.00	Payment This Period 20833.34	Outstanding Balance at Close of This Period 0.00

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="1667.73"/>	Transaction ID : SD10.4232	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1667.73"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING MARCH 2016
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="20833.34"/>	Transaction ID : SD10.4233	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="20833.34"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="610.66"/>	Transaction ID : SD10.4234	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="610.66"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 22 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING APRIL 2016
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 20833.34	Transaction ID : SD10.4235	
Amount Incurred This Period 0.00	Payment This Period 20833.34	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 602.16	Transaction ID : SD10.4236	
Amount Incurred This Period 0.00	Payment This Period 602.16	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING - MAY 2016
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 20833.34	Transaction ID : SD10.4237	
Amount Incurred This Period 0.00	Payment This Period 20833.34	Outstanding Balance at Close of This Period 0.00

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 23 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="341.96"/>	Transaction ID : SD10.4238	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="341.96"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): SHIPPING EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="123.76"/>	Transaction ID : SD10.4239	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="123.76"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="2198.24"/>	Transaction ID : SD10.4240	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2198.24"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 24 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): STRATEGIC CONSULTING
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="20833.34"/>	Transaction ID : SD10.4241	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="20833.34"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): SHIPPING AND NEW REPUBLICAN MERCHANDISE
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="4420.95"/>	Transaction ID : SD10.4242	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="4420.95"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): SHIPPING/MARKETING
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="775.15"/>	Transaction ID : SD10.4243	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="775.15"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="20833.34"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 25 OF 25
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): SHIPPING EXPENSE
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 155.00	Transaction ID : SD10.4244	
Amount Incurred This Period 0.00	Payment This Period 155.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): PRINTING
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 2433.70	Transaction ID : SD10.4245	
Amount Incurred This Period 0.00	Payment This Period 2433.70	Outstanding Balance at Close of This Period 0.00

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	Transaction ID :	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	21050.84
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	20000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	41050.84