

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER C C00553560
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee FORTH RIGHT STRATEGY INC <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016
Mailing Address 1155 - 15TH STREET NW SUITE 410		Amount 11853.98
City WASHINGTON	State DC	Zip Code 20005
Purpose of Expenditure VOTER CONTACT MAIL	Category/Type 004	Transaction ID : SE.45889 Date of Disbursement or Obligation MM / DD / YYYY 09 / 09 / 2016
Name of Federal Candidate WILLIAM HURD	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought	53006.94	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee FORTH RIGHT STRATEGY INC <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 09 / 2016
Mailing Address 1155 - 15TH STREET NW SUITE 410		Amount 11853.98
City WASHINGTON	State DC	Zip Code 20005
Purpose of Expenditure VOTER CONTACT MAIL	Category/Type 004	Transaction ID : SE.45890 Date of Disbursement or Obligation MM / DD / YYYY 09 / 09 / 2016
Name of Federal Candidate MIA LOVE	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>
Calendar Year-To-Date Per Election for Office Sought	38182.31	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

Signature _____ [Electronically Filed] Date MM / DD / YYYY
09 / 20 / 2016