

SCHEDULE L-A (FEC Form 3X)
ITEMIZED RECEIPTS OF LEVIN FUNDS

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

FOR LINE NUMBER:
 (check only one) 1a 2

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NAME OF COMMITTEE (In Full)

Nevada Republican State Central Committee

Full Name (Last, First, Middle Initial) / Full Organization Name

A. Bradbury H. Anderson

Account : 11

Mailing Address 13675 Vanderbilt Dr.

City Naples State FL Zip Code 34110-

Name of Employer or Principal Place of Business

.Information requested

Occupation .Information requested
 Levin Funds

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 18 2011

Transaction ID : SL11117.C103279

Amount of Each Receipt this Period

10000.00

Aggregate Year-to-Date

Full Name (Last, First, Middle Initial) / Full Organization Name

B. William Austin

Account : 11

Mailing Address 5334 Harbor Town Drive

City Dallas State TX Zip Code 75287-

Name of Employer or Principal Place of Business

Starkey Laboratories

Occupation President
 Levin Funds

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 18 2011

Transaction ID : SL11117.C103276

Amount of Each Receipt this Period

10000.00

Aggregate Year-to-Date

Full Name (Last, First, Middle Initial) / Full Organization Name

C. Dean V White

Account : 11

Mailing Address 1000 E 80th Place Ste 700N

City Merrillville State IN Zip Code 46410-

Name of Employer or Principal Place of Business

.Information requested

Occupation .Information requested
 Levin Funds

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 18 2011

Transaction ID : SL11117.C103280

Amount of Each Receipt this Period

10000.00

Aggregate Year-to-Date

Full Name (Last, First, Middle Initial) / Full Organization Name

D.

Account :

Mailing Address

City State Zip Code

Name of Employer or Principal Place of Business

Occupation

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Aggregate Year-to-Date

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

30000.00

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

30000.00