



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)**

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="2015"/>	<input type="text" value="65748.04"/>	<input type="text" value="65748.04"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="61061.29"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="5660.00"/>	<input type="text" value="90168.50"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="66721.29"/>	<input type="text" value="155916.54"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="7505.35"/>	<input type="text" value="96700.60"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="59215.94"/>	<input type="text" value="59215.94"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)**

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).....	3405.00	51915.50
(ii) Unitemized .....	2255.00	38153.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5660.00	90068.50
(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) .....	5660.00	90068.50
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	100.00
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))..... ▶	5660.00	90168.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5660.00	90168.50

**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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	7505.35	96700.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	7505.35	96700.60
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 (2 U.S.C. §441a(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 .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	7505.35	96700.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7505.35	96700.60

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	5660.00	90068.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5660.00	90068.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	7505.35	96700.60
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	100.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	7505.35	96600.60

**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 6 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<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)  
**FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)**

**A. Linda Bartlett**  
Full Name (Last, First, Middle Initial)

Mailing Address 4316 Wakefield Drive

City Annandale State VA Zip Code 22003

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

Name of Employer N/A Occupation reitred

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2015

**Transaction ID : SA11AI.27799**

Amount of Each Receipt this Period  
 65.00

**B. Mrs. Louella F. Benson**  
Full Name (Last, First, Middle Initial)

Mailing Address 6432 Montrose St.

City Alexandria State VA Zip Code 22312

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

Name of Employer J. L. Benson, deceased Engin. Economis Occupation Retired Adm. Secty. BKKP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 25 / 2015

**Transaction ID : SA11AI.27768**

Amount of Each Receipt this Period  
 120.00

**C. Thomas P. Curtin**  
Full Name (Last, First, Middle Initial)

Mailing Address 13914 Springstone Drive

City Clifton State VA Zip Code 20124

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

Name of Employer Remas Executive Occupation Realtor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2015

**Transaction ID : SA11AI.27757**

Amount of Each Receipt this Period  
 65.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 7 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)**

**A. Mrs Linda K Douglas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11810 Grey Birch Place  
 City Reston State VA Zip Code 20191-4223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Consultant  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **750.00**

Date of Receipt **09 / 30 / 2015**  
**Transaction ID : SA11AI.27782**  
 Amount of Each Receipt this Period **250.00**

**B. Anne Erickson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7516 Tutley Terr  
 City Clifton State VA Zip Code 20124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **415.00**

Date of Receipt **09 / 25 / 2015**  
**Transaction ID : SA11AI.27778**  
 Amount of Each Receipt this Period **65.00**

**C. Frank J Fisher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7503 Box Elder Ct  
 City Mclean State VA Zip Code 22102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self Occupation Tax Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **240.00**

Date of Receipt **09 / 21 / 2015**  
**Transaction ID : SA11AI.27742**  
 Amount of Each Receipt this Period **65.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>380.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**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 8 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)**

**A. Mrs. Frances C. Lane**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6805 Melrose Drive  
 City McLean State VA Zip Code 22101  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt 09 / 21 / 2015  
**Transaction ID : SA11AI.27744**  
 Amount of Each Receipt this Period 250.00

**B. Herbert B Markle**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 58  
 City Newington State VA Zip Code 22122  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2015  
**Transaction ID : SA11AI.27811**  
 Amount of Each Receipt this Period 200.00

**C. Steven Mullins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1127 Walker Rd  
 City Great Falls State VA Zip Code 22066  
 Name of Employer KZO Innovations Occupation CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2015  
**Transaction ID : SA11AI.27813**  
 Amount of Each Receipt this Period 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 9 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)**

**A. Dorene O'Hara**  
Full Name (Last, First, Middle Initial)

Mailing Address 1733 Port Place #401

City Reston State VA Zip Code 20194

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

Name of Employer Self employed Occupation Teacher/Tutor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2015  
**Transaction ID : SA11AI.27804**

Amount of Each Receipt this Period 250.00

**B. Jennifer Rossman**  
Full Name (Last, First, Middle Initial)

Mailing Address 8000 Greenwich Woods Dr

City McLean State VA Zip Code 22102

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 09 / 25 / 2015  
**Transaction ID : SA11AI.27779**

Amount of Each Receipt this Period 500.00

**C. John Schwarzman**  
Full Name (Last, First, Middle Initial)

Mailing Address 2046 Swans Neck Way

City Reston State VA Zip Code 20191

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

Name of Employer SalesUP, Inc. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 09 / 29 / 2015  
**Transaction ID : SA11AI.27819**

Amount of Each Receipt this Period 65.00

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

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

**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 10 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)**

**A. Sara J Segal**  
Full Name (Last, First, Middle Initial)

Mailing Address 9708 Turnbuckle Dr

City State Zip Code  
Burke VA 22015

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

Name of Employer Occupation  
FCPS Instructional Assistant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1550.00

Date of Receipt  
09 / 21 / 2015  
Transaction ID : SA11AI.27755

Amount of Each Receipt this Period  
1000.00

**B. Elizabeth Troiani**  
Full Name (Last, First, Middle Initial)

Mailing Address 904 Grant St

City State Zip Code  
Herndon VA 20170

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
09 / 23 / 2015  
Transaction ID : SA11AI.27759

Amount of Each Receipt this Period  
195.00

**C. Susan Valentine**  
Full Name (Last, First, Middle Initial)

Mailing Address 6487 Warwick Circle

City State Zip Code  
Alexandria VA 22315

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

Name of Employer Occupation  
Self Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
395.00

Date of Receipt  
09 / 16 / 2015  
Transaction ID : SA11AI.27793

Amount of Each Receipt this Period  
65.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1260.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3405.00

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)**

Full Name (Last, First, Middle Initial)

**A. 7-11 Stores**

Mailing Address 2711 N Haskell Ave

City Dallas State TX Zip Code 75204

Purpose of Disbursement  
Sundries

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2015

Transaction ID : SB21B.27720

Amount of Each Disbursement this Period

2.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 1279

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
AX Bill

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2015

Transaction ID : SB21B.27705

Amount of Each Disbursement this Period

1407.43

Full Name (Last, First, Middle Initial)

**C. Authorize.net**

Mailing Address 808 East Utah Valley Drive

City American Fork State UT Zip Code 84003

Purpose of Disbursement  
Card processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2015

Transaction ID : SB21B.27704

Amount of Each Disbursement this Period

27.90

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

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

1435.33

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)**

Full Name (Last, First, Middle Initial)

**A. Constant Conact**

Mailing Address 1601 Trapelo Road #329

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Email service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2015

**Transaction ID : SB21B.27712**

Amount of Each Disbursement this Period

195.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Cox Communications Inc**

Mailing Address 4246 Chain Bridge Rd

City Fairfax State VA Zip Code 22033

Purpose of Disbursement  
Phone bill

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

**Transaction ID : SB21B.27729**

Amount of Each Disbursement this Period

293.53

Full Name (Last, First, Middle Initial)

**C. Dominion Virginia Power**

Mailing Address P.O. Box 26543

City Richmond State VA Zip Code 23290

Purpose of Disbursement  
Utility

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2015

**Transaction ID : SB21B.27706**

Amount of Each Disbursement this Period

67.07

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

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

360.60

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)**

Full Name (Last, First, Middle Initial)

**A. Executive Press**

Mailing Address Main Street

City Fairfax State VA Zip Code 22030

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 11 / 2015

**Transaction ID : SB21B.27726**

Amount of Each Disbursement this Period

49.36

Full Name (Last, First, Middle Initial)

**B. Fairfax County Public Schools**

Mailing Address 8115 Gatehouse Road

City Falls Church State VA Zip Code 22042

Purpose of Disbursement  
Room rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2015

**Transaction ID : SB21B.27703**

Amount of Each Disbursement this Period

188.00

Full Name (Last, First, Middle Initial)

**C. Fairfax Professional Village**

Mailing Address 4240 Chain Bridge Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement  
Condo fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2015

**Transaction ID : SB21B.27724**

Amount of Each Disbursement this Period

302.44

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

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

539.80

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)**

Full Name (Last, First, Middle Initial)

**A. JR's Custom Catering**

Mailing Address 253 Sunset Park Dr

City Herndon State VA Zip Code 22170

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2015

Transaction ID : SB21B.27717

Amount of Each Disbursement this Period

860.88

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Bryce Kidwell**

Mailing Address 11428 Tiger Lily Lane

City Fairfax State VA Zip Code 22030

Purpose of Disbursement  
Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2015

Transaction ID : SB21B.27725

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Panera Bread**

Mailing Address 3955 Chain Bridge Road

City Fairfax State VA Zip Code 22030

Purpose of Disbursement  
Food

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2015

Transaction ID : SB21B.27709

Amount of Each Disbursement this Period

123.14

[MEMO ITEM]

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

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

1000.00

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)**

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc**

Mailing Address 101 Waxhaw Professional Park # G

City Waxhaw State NC Zip Code 28173

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2015

**Transaction ID : SB21B.27785**

Amount of Each Disbursement this Period

188.36

Full Name (Last, First, Middle Initial)

**B. Pizza Hut**

Mailing Address 1234 Main St

City Fairfax State VA Zip Code 22030

Purpose of Disbursement Food

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2015

**Transaction ID : SB21B.27723**

Amount of Each Disbursement this Period

76.90

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Richard's Heating and A/C**

Mailing Address 200 Hillwood Ave

City Falls Church State VA Zip Code 22046

Purpose of Disbursement HVAC work

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 02 / 2015

**Transaction ID : SB21B.27707**

Amount of Each Disbursement this Period

95.00

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

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

283.36

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)**

Full Name (Last, First, Middle Initial)

**A. Kyle Robinson**

Mailing Address 327 11th St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Consulting fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2015

**Transaction ID : SB21B.27702**

Amount of Each Disbursement this Period

1750.00

Full Name (Last, First, Middle Initial)

**B. Kyle Robinson**

Mailing Address 327 11th St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Consulting fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 15 / 2015

**Transaction ID : SB21B.27727**

Amount of Each Disbursement this Period

1750.00

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 9470 Arlington Blvd

City Fairfax State VA Zip Code 22031

Purpose of Disbursement  
Office supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 08 / 2015

**Transaction ID : SB21B.27708**

Amount of Each Disbursement this Period

149.51

**[MEMO ITEM]**

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

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

3500.00

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**FAIRFAX COUNTY REPUBLICAN COMMITTEE (FEDERAL)**

Full Name (Last, First, Middle Initial)

**A. Xerox Financial Services**

Mailing Address 100 Stamford Pl # 201

City State Zip Code  
Stamford CT 06902

Purpose of Disbursement  
Equipment rental

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 22 / 2015

**Transaction ID : SB21B.27728**

Amount of Each Disbursement this Period

386.26

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

386.26

7505.35