

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. 12FE4M5 NEW REPUBLICAN.ORG

ADDRESS (number and street) 815 SLATERS LANE ALEXANDRIA VA 22314

2. FEC IDENTIFICATION NUMBER C00544544 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 12 / 01 / 2015 through 12 / 31 / 2015

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 Gentry Collins

Signature of Treasurer Gentry Collins [Electronically Filed] Date 01 / 14 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NEW REPUBLICAN.ORG

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="1389.45"/>	<input type="text" value="1389.45"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="21029.72"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="45348.72"/>	<input type="text" value="480448.72"/>
(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="66378.44"/>	<input type="text" value="481838.17"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="62953.26"/>	<input type="text" value="478412.99"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3425.18"/>	<input type="text" value="3425.18"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="53423.07"/>	

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

NEW REPUBLICAN.ORG

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).....	45348.72	460348.72
(ii) Unitemized	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	45348.72	460448.72
(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)	45348.72	460448.72
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	20000.00
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))..... ▶	45348.72	480448.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	45348.72	480448.72

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 (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	62953.26	478412.99
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)) ..	62953.26	478412.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	62953.26	478412.99

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	45348.72	460448.72
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	45348.72	460448.72
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 A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 OF 20
(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
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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.ORG

Full Name (Last, First, Middle Initial)
A. Cherna Moskowitz

Mailing Address 4744 N Bay Road

City Miami Beach	State FL	Zip Code 33140
---------------------	-------------	-------------------

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

Name of Employer Self	Occupation Self
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2015

Transaction ID : SA11AI.4654

Amount of Each Receipt this Period
10000.00

Donation

Full Name (Last, First, Middle Initial)
B. New Republican, LLC

Mailing Address 815 Slaters Lane

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35348.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2015

Transaction ID : SA11AI.4659

Amount of Each Receipt this Period
35348.72

Political Donation

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	45348.72
TOTAL This Period (last page this line number only).....▶	45348.72

**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"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW REPUBLICAN.ORG

Full Name (Last, First, Middle Initial)

A. Alejandro Castellanos

Mailing Address 399 North Quaker Lane

City Alexandria State VA Zip Code 22304

Purpose of Disbursement
Shipping Expenses

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SB29.4674

Amount of Each Disbursement this Period

1409.94

Full Name (Last, First, Middle Initial)

B. Alejandro Castellanos

Mailing Address 399 North Quaker Lane

City Alexandria State VA Zip Code 22304

Purpose of Disbursement
Meals

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SB29.4675

Amount of Each Disbursement this Period

318.28

Full Name (Last, First, Middle Initial)

C. Bluebonnet Fundraising

Mailing Address 3300 Bee Caves Road # 650-1151

City Austin State TX Zip Code 78746

Purpose of Disbursement
Consulting - Fundraising

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 22 / 2015

Transaction ID : SB29.4666

Amount of Each Disbursement this Period

2500.00

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

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

4228.22

**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"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW REPUBLICAN.ORG

Full Name (Last, First, Middle Initial)

A. Bluebonnet Fundraising

Mailing Address 3300 Bee Caves Road # 650-1151

City State Zip Code
Austin TX 78746

Purpose of Disbursement
Consulting - Fundraising

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2015

Transaction ID : SB29.4667

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Bluebonnet Fundraising

Mailing Address 3300 Bee Caves Road # 650-1151

City State Zip Code
Austin TX 78746

Purpose of Disbursement
Consulting - Fundraising

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2015

Transaction ID : SB29.4668

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. Jones Day

Mailing Address 51 Louisiana Ave NW

City State Zip Code
Washington DC 20001-2113

Purpose of Disbursement
Legal Expenses

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2015

Transaction ID : SB29.4665

Amount of Each Disbursement this Period

6576.95

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

12576.95

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"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW REPUBLICAN.ORG

Full Name (Last, First, Middle Initial)

A. New Republican, LLC

Mailing Address 815 Slaters Lane

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Administrative Consulting

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2015

Transaction ID : SB29.4661

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. New Republican, LLC

Mailing Address 815 Slaters Lane

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Administrative Consulting

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2015

Transaction ID : SB29.4662

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C. New Republican, LLC

Mailing Address 815 Slaters Lane

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Administrative Consulting

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2015

Transaction ID : SB29.4663

Amount of Each Disbursement this Period

10000.00

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

30000.00

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"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW REPUBLICAN.ORG

Full Name (Last, First, Middle Initial)

A. New Republican, LLC

Mailing Address 815 Slaters Lane

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Administrative Consulting

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2015

Transaction ID : **SB29.4664**

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. On Message, Inc.

Mailing Address 705 Melvin Ave.
Ste. 105

City Annapolis State MD Zip Code 21401

Purpose of Disbursement
Marketing Research and Focus Group

005

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2015

Transaction ID : **SB29.4669**

Amount of Each Disbursement this Period

3467.94

Full Name (Last, First, Middle Initial)

C. Peak Branding Inc

Mailing Address 3578 Hartsel Drive
Unit E-112

City Colorado Springs State CO Zip Code 80920

Purpose of Disbursement
Marketing - USB Drives

004

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2015

Transaction ID : **SB29.4660**

Amount of Each Disbursement this Period

2185.00

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

15652.94

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"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NEW REPUBLICAN.ORG

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address PO Box 660720

City Dallas State TX Zip Code 75266-0720

Purpose of Disbursement
Phones

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			22			2015			

Transaction ID : SB29.4670

Amount of Each Disbursement this Period

267.37

Full Name (Last, First, Middle Initial)

B. Verizon

Mailing Address PO Box 660720

City Dallas State TX Zip Code 75266-0720

Purpose of Disbursement
Phones

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			22			2015			

Transaction ID : SB29.4671

Amount of Each Disbursement this Period

227.78

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

<input type="text"/>

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

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

495.15

62953.26

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) NEW REPUBLICAN.ORG	Transaction ID : SC/10.4494
--	------------------------------------

LOAN SOURCE Full Name (Last, First, Middle Initial) Alejandro Castellanos	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 20000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 20000.00
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TERMS

Date Incurred MM / DD / YYYY 02 / 03 / 2015	Date Due MM / DD / YYYY 12/31/2015	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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 13 OF 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN.ORG

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alejandro Castellanos	Nature of Debt (Purpose): Shipping Expenses
Mailing Address 399 North Quaker Lane	
City State Zip Code Alexandria VA 22304	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4672	
Amount Incurred This Period 1409.94	Payment This Period 1409.94	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alejandro Castellanos	Nature of Debt (Purpose): Meals
Mailing Address 399 North Quaker Lane	
City State Zip Code Alexandria VA 22304	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4673	
Amount Incurred This Period 318.28	Payment This Period 318.28	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bluebonnet Fundraising	Nature of Debt (Purpose): Consulting - Fundraising October
Mailing Address 3300 Bee Caves Road # 650-1151	
City State Zip Code Austin TX 78746	

Outstanding Balance Beginning This Period 2500.00	Transaction ID : SD10.4639	
Amount Incurred This Period 0.00	Payment This Period 2500.00	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 14 OF 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN.ORG

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bluebonnet Fundraising	Nature of Debt (Purpose): Consultant - Fundraising
Mailing Address 3300 Bee Caves Road # 650-1151	
City State Zip Code Austin TX 78746	

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>	Transaction ID : SD10.4646	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bluebonnet Fundraising	Nature of Debt (Purpose): Consultant - Fundraising
Mailing Address 3300 Bee Caves Road # 650-1151	
City State Zip Code Austin TX 78746	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.4648	
Amount Incurred This Period <input type="text" value="3500.00"/>	Payment This Period <input type="text" value="3500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jones Day	Nature of Debt (Purpose): Legal Fees
Mailing Address 51 Louisiana Ave NW	
City State Zip Code Washington DC 20001-2113	

Outstanding Balance Beginning This Period <input type="text" value="6576.95"/>	Transaction ID : SD10.4645	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="6576.95"/>	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 15 OF 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN.ORG

A. 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 State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 18012.93	Transaction ID : SD10.4612	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 18012.93

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor New Republican, LLC	Nature of Debt (Purpose): Administrative Consulting
Mailing Address 815 Slaters Lane	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 10000.00	Transaction ID : SD10.4613	
Amount Incurred This Period 0.00	Payment This Period 10000.00	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): Travel Expenses
Mailing Address 815 Slaters Lane	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 3769.58	Transaction ID : SD10.4614	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3769.58

1) SUBTOTALS This Period This Page (optional)..... ▶	21782.51
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 16 OF 20
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN.ORG

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor New Republican, LLC	Nature of Debt (Purpose): Administrative Consulting
Mailing Address 815 Slaters Lane	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 10000.00	Transaction ID : SD10.4620	
Amount Incurred This Period 0.00	Payment This Period 10000.00	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): Travel Expenses
Mailing Address 815 Slaters Lane	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 2248.68	Transaction ID : SD10.4621	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2248.68

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 State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 2117.29	Transaction ID : SD10.4622	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2117.29

1) SUBTOTALS This Period This Page (optional)..... ▶	4365.97
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 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN.ORG

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor New Republican, LLC	Nature of Debt (Purpose): Printing - Advertising/Marketing Booklets
Mailing Address 815 Slaters Lane	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period <input type="text" value="904.12"/>	Transaction ID : SD10.4641	
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="904.12"/>

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 State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period <input type="text" value="2640.03"/>	Transaction ID : SD10.4642	
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="2640.03"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor New Republican, LLC	Nature of Debt (Purpose): Consulting Administrative
Mailing Address 815 Slaters Lane	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period <input type="text" value="10000.00"/>	Transaction ID : SD10.4643	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="10000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="3544.15"/>
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 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN.ORG

A. 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 State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4651	
Amount Incurred This Period 1352.72	Payment This Period 0.00	Outstanding Balance at Close of This Period 1352.72

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor New Republican, LLC	Nature of Debt (Purpose): Consulting - Administrative
Mailing Address 815 Slaters Lane	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4652	
Amount Incurred This Period 10000.00	Payment This Period 10000.00	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): Travel Expenses
Mailing Address 815 Slaters Lane	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4650	
Amount Incurred This Period 2377.72	Payment This Period 0.00	Outstanding Balance at Close of This Period 2377.72

1) SUBTOTALS This Period This Page (optional)..... ▶	3730.44
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 19 OF 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN.ORG

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor On Message, Inc.	Nature of Debt (Purpose): Marketing Research and Focus Group
Mailing Address 705 Melvin Ave. Ste. 105	
City State Zip Code Annapolis MD 21401	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.4649	
Amount Incurred This Period <input type="text" value="3467.94"/>	Payment This Period <input type="text" value="3467.94"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Peak Branding Inc	Nature of Debt (Purpose): Marketing - USB Drives
Mailing Address 3578 Hartsel Drive Unit E-112	
City State Zip Code Colorado Springs CO 80920	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.4657	
Amount Incurred This Period <input type="text" value="2185.00"/>	Payment This Period <input type="text" value="2185.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon	Nature of Debt (Purpose): Phones November
Mailing Address PO Box 660720	
City State Zip Code Dallas TX 75266-0720	

Outstanding Balance Beginning This Period <input type="text" value="267.37"/>	Transaction ID : SD10.4644	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="267.37"/>	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 20 OF 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN.ORG

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Verizon	Nature of Debt (Purpose): Phones
Mailing Address PO Box 660720	
City State Zip Code Dallas TX 75266-0720	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.4655	
Amount Incurred This Period <input type="text" value="227.78"/>	Payment This Period <input type="text" value="227.78"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. 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 <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

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 <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

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" value="33423.07"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="20000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="53423.07"/>