REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

PLEASE PRINT OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)

National Republican Senatorial Committee

ADDRESS (number and street) ☐ Check if different than previously reported

425 Second Street, NE

CITY, STATE and ZIP CODE

Washington, DC 20002

SECRETARY OF THE SENATE

01 JUL 20 PM 3:18

2. FEC IDENTIFICATION NUMBER

C00027466

3 ☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20	☐ June 20	☐ October 20
☐ March 20	☐ July 20	☐ November 20
☐ April 20	☒ August 20	☐ December 20
☐ May 20	☐ September 20	☐ January 31

☐ Twelfth day report preceding _____ (Type of Election)

election on _____ in the State of _____.

☐ Thirtieth day report following the General Election on

_____ in the State of _____.

(b) Is this Report an Amendment? ☒ YES ☐ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 07/01/00 through 07/31/00		
6. (a) Cash on Hand January 1, 19 _____		$
(b) Cash on Hand at Beginning of Reporting Period	$	
(c) Total Receipts (from line 19)	$	$
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$	$
7. Total Disbursements (from Line 30)	$	$
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$	$
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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

D. Jan McBride Assistant Treasurer

Signature of Treasurer

Jan McBride

Date 7/18/01

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

FEC FORM 3X

(revised 9/93)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 22

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)

NATIONAL REPUBLICAN SENATORIAL COMMITTEE FEC ID NO. C00027466

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. Republican National Cmte. 310 First Street, SE Washington, DC 20013	Transfer	07/01/00 07/11/00	400,000.00 9,750.00
B. Republican Party of Florida 719 N. Calhoun St. Tallahassee, FL 32303	Transfer	07/06/00	100,000.00
C. Missouri Republican State Committee 204 E. Dunklin Jefferson City, MO 65101	Transfer	07/07/00 07/11/00	34,800.00 7,100.00
D. Rhode Island Republican State Central Committee 551 South Main Street Providence, RI 02903	Transfer	07/25/00	14,000.00
E.			
F.			
G.			
H.			
I.			

SUBTOTAL of Disbursements This Page (optional) 565,650.00

TOTAL This Period (last page this line number only) 565,650.00

GARY SISCO
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

Hart Building
Suite 232
WASHINGTON, DC 20510-7116
Phone: 202-224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

_____ **HAND DELIVERED** _____
Date of Receipt

_____ **FAX (48-HOUR NOTICES)** _____
Date of Receipt

_____ **INSIDE MAIL** _____
Date of Receipt

_____ **RECEIVED FROM THE LEGISLATIVE RESOURCE CENTER** _____
Date of Receipt

_____ **RECEIVED FROM THE FEDERAL ELECTION COMMISSION** _____
Date of Receipt

_____ **FIRST CLASS MAIL** _____
Postmarked

_____ **REGISTERED/CERTIFIED MAIL** _____
Postmarked

_____ **NO POSTMARK** _____ **POSTMARK ILLEGIBLE**

_____ **OTHER (Specify):** _____
_____ **AIRBORNE EXPRESS**
_____ **EXPRESS MAIL**
_____ **FEDERAL EXPRESS**
_____ **UPS**
_____
Postmark and/or Date of Receipt

_____
Preparer **Date Prepared**