FEC FORM 3X

Signature of Treasurer

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2016 BRICT UL 3 ON PM 1: 13

Date 10 26 2016

								110 Diffice Us	e Only	1 10
1.	NAME C	TEE (in full)	TYPE OR P	RINT ▼	Example: If typic over the lines.	ng, type	12FE4M	15	1	
N	/APA	COUNT	1 REP	BLICAN	CENTRAL	GOM	MITT	24	<u> </u>	
L								1 1 1 1	1 1 1	لحب
ADI	DRESS (r	number and street)	P.O.	130x 3	263		1 1 1 1	<u> </u>		
)]	thar	eck if different n previously orted. (ACC)	INAI	5¥: 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			CA	1945	5 58 -L	
<u>.</u> 2.	FEC ID	ENTIFICATION N	UMBER ▼	CITY	.		STATE A		ZIP CODE	A .
<u>)</u>	CO	04556	5,9	3. IS T REP		NEW (N) OR		AMENDED (A)		
	(Choose	OF REPORT One) arterly Reports: April 15 Quarterly Report (July 15 Quarterly Report (October 15 Quarterly Report (January 31 Year-End Report (July 31 Mid-Year Report (Non-elect Year Only) (MY) Termination Report (TER)	(Q1) (c) (Q2) (Q3) (YE) (d)	, , , , ,	(M3) (M4) Primary (12 Convention On General (30)	(12C)	S Gener Specia	ag 20 (M8) ap 20 (M9) ct 20 (M10) al (12G) al (12S)	in the State of	Nov 20 (M11) Non-Election ear Only) Dec 20 (M12) Non-Election ear Only) Ian 31 (YE) Runoff (12R)
5.	Coverin	g Period	ا مُ	12016	through	109	136	20	16	
		I have examined at Name of Treasur		nd to the best of m	y knowledge and	belief it is tr	ue, correct	and comple	te.	

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

Office Use Only

FEGAN026

Joseph Blevins

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

AALIFE	Oi	ı ype	Committee	IAGILIE

NAPA COUNTY REPUBLICAN CENTRAL COMMITTEE

Report Covering the Period:

Debts and Obligations Owed TO the Committee (Itemize all on

 Debts and Obligations Owed BY the Committee (Itemize all on

Schedule C and/or Schedule D)

Schedule C and/or Schedule D)

From:

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e 7		01		2

To.



30

2016

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1,		, 12,3190.00
	(b) Cash on Hand at Beginning of Reporting Period	2.01415.00	₹ •
	(c) Total Receipts (from Line 19)	13,8,9,900	4,1,8,3.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	15,91414.00	7,473.00
7.	Total Disbursements (from Line 31)	. 1,9614.00	301913.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3,9,80,00	3,9,8,0.00

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

FE6AN028

2016-10-13-03-00104928

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

4.183.00

Write or Type Committee Name

NAPA COUNTY REPUBLICAN CENTRAL COMMITTEE

2016 D16 To: Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 520.00 ,520.00 (i) Itemized (use Schedule A)..... 35 43 .00 3,379.00 (ii) Unitemized (iii) TOTAL (add 4,183,00 3,899.00 Lines 11(a)(i) and (ii).....▶ (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 3899.00 4183.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)..... (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))....... 3899.00 20. Total Federal Receipts

38 99.00

(subtract Line 18(c) from Line 19)......▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B** II. Disbursements **Total This Period** Calendar Year-to-Date 21. Operating Expenditures: Allocated Federal/Non-Federal Activity (from Schedule H4) Federal Share (ii) Non-Federal Share..... (b) Other Federal Operating 3,093,00 Expenditures 1,964,00 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) 1,964,00 3093.00 22. Transfers to Affiliated/Other Party 6 and Other Political Committees..... 24. Independent Expenditures Ō 26. Loan Repayments Made..... Loans Made......Refunds of Contributions To: 28. Individuals/Persons Other (a) Than Political Committees (b) Political Party Committees 00104930 Other Political Committees (such as PACs)..... (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).........▶ 29. Other Disbursements 30. Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share (ii) "Levin" Share..... (b) Federal Election Activity Paid Entirely 3093.DD 1,964,00 With Federal Funds (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....> 1,964.00 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 1,96400 3,093.00 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 3093.00 1.964.00 from Line 31).....

DETAILED SUMMARY PAGE of Disbursements

FEC FORM SA (Hev. 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)	, 3899.00	, H83.00
34. Total Contribution Refunds (from Line 28(d))	, 🚓,	, O .
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	, 3899.00	, 4,183.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	, 1,964.00	, 3 09360
37. Offsets to Operating Expenditures (from Line 15, page 3)	, O , .	, a , .
38. Net Operating Expenditures (subtract Line 37 from Line 36)	, 1,964.00	3.093.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER (check only one)		6 OF 12
	ny information copied from such Reports and S		ay not be sold or used by any per			
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	ddress of any political committee	to solicit contribution	is from such	committee.
	NAPA COUNTY RE	PUBLI	CAN CENTRAL	COMMIT	TEE	<u> </u>
. A .		5		Date of Receip	t ·	
	Mailing Address 284 EAST 5 City	ST DEF	Zip Code	Ø9 B		016
	BENECIA	CA	94510	Amount of Eac	•	is Period
2	FEC ID number of contributing federal political committee.	C				,2 <i>0,00</i>
2016	Name of Employer SEZ F	Occupation	PACTOR			
1	Receipt For: Primary General	Aggregate	Year-to-Date ▼			
<u> </u>	MOther (specify) ▼ FUND ZAIS/NG ZBZ Q		3.2.0.00		į į	
1 B .				Date of Receip	ıt	
	Mailing Address 1044 TBELL LANE City	State	Zip Code	<u> </u>	6 2	016
	NAPA	CA	94558	Amount of Eac	h Receipt th	is Period
0 0 1	FEC ID number of contributing federal political committee.	C			<u> ,2</u>	00.00
10/1932	REND'S FLOOR COVER.	Occupation SA)	ESTERSON-OWNER	<u>.</u>	·	}
i Develop	Receipt For: Primary General	Aggregate	Year-to-Date ▼		. •	: :
***	UND EALSING TSTSQ Full Name (Last, First, Middle Initial)		A			· · · · · · · · · · · · · · · · · · ·
C.	Mailing Address			Date of Receip	t	Contract of the Contract of th
	City	State	Zip Code			
	FEC ID number of contributing			Amount of Eac	h Receipt th	is Period
	federal political committee. Name of Employer	Occupation			A 4 /A	
	Receipt For:	<u> </u>				
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼			
						· ·
9	SUBTOTAL of Receipts This Page (optional)		<u> </u>			
۱ ا	OTAL This Period (last page this line number	only)			<u> </u>	

SCHEDULE B (FEC Form 3X)	I lies senerate sehedule(s) I		IUMBER: PAGE 7 OF 12
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one) 22 23 24 25 26
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any information copied from such Reports and Statem	nents may not be sold or used	by any perso	n for the purpose of soliciting contributions
or for commercial purposes, other than using the name	e,and address of any political	committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			·
NATA COUNTY REPU	<u>BLÌCAN CEN</u>	T/2 N I	COMMITTEE
Full Name (Last, First, Middle Initial)	BLIGHN LEN	/KC.Pt L	Dimilite
A. HANGMAN CHRIS	(JUMPERS).	,	Date of Disbursement
Mailing Address	JUNITERS, J.	<u>'</u>	AB 11 2016
1148 STATE LANG		ZNI e m	
City	State Zip Code	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Programme and the second
YOUNTVILLE Purpose of Disbursement	CA 94599	<u>. </u>	
PENTAL OF CHAIRS & TH	7731 ES		' Amount of Each Disbursement this Period
Candidate Name	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Category/	2 1 4 0 0
Office Sought: House	ant For	Туре	
Office Sought: House Disbursen	Primary General		
L-1	Other (specify) ▼		
State: District: FUND	PAISING TIBO		
Full Name (Last, First, Middle Initial) B.	·		Date of Disbursement
BERGER SEFF	•		MAM / DED / YEYEY
Mailing Address	C (1//05/C (T)	207	09 11 2016
	State Zip Code	OHD	
	ห็้ รี่ชีรีรรๆ		
Purpose of Disbursement	./. R**		
MUSIC FOR FUND RALL Candidate Name	ING TSTEQ"		Amount of Each Disbursement this Period
·		Category/ Type	1,200,00
Office Sought: House Disbursen	nent For:	<u> </u>	
Senate President	Primary ☐ General Other (specify) ▼		
	TRAISING TETEO		
Full Name (Last, First, Middle Initial)			· · · · · · · · · · · · · · · · · · ·
c. SCHAUPP CHARLES			Date of Disbursement
Mailing Address			99 77 2016
17114 YOLO AVENUE			
	State Zip Code 2 7 9 56 2 7		·
Purpose of Disbursement	<u> 2A 95627</u>		·
FOOD FOR TOTAGE VEN	IT .		Amount of Each Disbursement:this Period
Candidate Name	. AR	Category/	0.8 (1.00
Office Sought: House Disburser	nent For:	Type	<u> </u>
Senate	Primary General		·
President	Other (specify) ▼		
State: District: FUND	RAISING TSBO EVE	WT .	
SUBTOTAL of Disbursements This Page (optional)			
COLUMN TO STATE OF THE PROPERTY OF THE PROPERT			
TOTAL This Period (last page this line number only)	•••••		L

SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 8 OF 12
FOR LINE 13 OF FORM 3X

	ne (Last, First, Mi	ddle Initial)	CAN CENTRAL	Election: Primary General Other (specify)	
Mailing Address				Other (specify)	▼
City		State Z	IP Code	-	
Original Amount of Loan		Cumulative Paym	ent To Date B	alance Outstanding at C	lose of This Period
; .	-	£	,	¥ , , , ,	
TERMS	7	Date	Due Interest R	ata	Secured:
Date Incurr	ed.	T 1 6 8	e Due interest A	ате . % (арг)	Yes No
List All Endorsers or Gua	arantors (il any)	to Loan Source			
1. Full Name (Last, First,	Middle Initial		Name of Employer		
Mailing Address		 	Occupation	-	····
City	State	ZIP Code	Amount Guaranteed		
		Z	Outstanding:	· · · · · · · · · · · · · · · · · · ·	
2. Full Name (Last, First,	Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Graranteed 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:	, ,	
BTOTALS This Period Thi	s Page (entional)				
PIOTALS THIS FEHIOR THE	- age (Optional)			<i>f</i>	

2016: 10: 19: 0M: 001019N5

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page _____ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full)	and the second	FEC	DENTIFICATION NUMBER
NAPA -COUNTY REPUBLICAN	CENTRAL COMMIT	TEE C	00455659
ENDING INSTITUTION (LENDER) Full Name	Amount of Loan		Interest Rate (APR)
	1 ;		, a:
Mailing Address	Date Incurred or Established	u v	D W Y 2 W
City State Zip Code	Date Due	M P	
A. Has loan been restructured? No Yes	If yes, date originally incurred		
B. If line of credit, Amount of this Draw:	Total Outstanding , Balance:	,	
C. Are other parties secondarily liable for the debt incurre No Yes (Endorsers and guarantors mu	ed? ust be reported on Schedule C.)		
D. Are any of the following pledged as collateral for the I property, goods, negotiable instruments, cartificates of stocks, accounts receivable, cash on deposit or other No Yes If yes, specify:	deposit, chattel papers,		value of this collateral?
	1	Does the le	nder have a perfected security No Yes
E. Are any future contributions or future receipts of interecollateral for the loan? No Yes If yes, s		What is the	estimated value?
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:		
Date account established:	Address: City, State, Zip:		
F. If neither of the types of collateral described above was the loan amount, state the basis upon which this loan	s pledged for this loan, or it the was made and the basis on wh	amount pled nich it assure	ged does not equal or exceed s repayment.
G. COMMITTEE TREASURER Typed Name		DATE	2 - 9 - 1 - 1 - 1 - 1
Signature			_
H. Attach a signed copy of the loan agreement. I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the teare accurate as stated above. II. The loan was made on terms and conditions (incominal extensions of credit to other borrowers of the institution is aware of the requirement that a complied with the requirements set forth at 11 C.	cluding interest rate) no more fa comparable credit worthiness. a loan must be made on a basis	vorable at the	e time than toose imposed for
AUTHORIZED REPRESENTATIVE Typed Name		DATE	
Signature Titl	te	\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 10 OF /2 FOR LINE NUMBER: (check only one)

9
10

	L	Tidinacied line)
AME OF COMMITTEE (In Full)	, was a	
NAPA COUNTY REP	ITTY ICAN CENTR	PAL COMMITTEE
X. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor	Nature of Debt (Purpose):
		(a.pass),
		·
Mailing Address		
City State	Zip Code	į .
Outstanding Balance Beginning This Period		
Amount Incurred Tine Period	Payment This Period	Outstanding Balance at Close of This Pe
, :	•	1 1
B. Full Name (Last, First, Middle Initial) of Debtor of	Creditor	Nature of Debt (Purpose):
	•	
Mailing Address	~	
City State	Code	
	<u></u>	<u> </u>
Outstanding Balance Beginning This Period		
, , , , , , , , , , , , , , , , , , , ,	_ \	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Pe
, , , ,		
, , , , , ,	,	· · · · · · · · · · · · · · · · · · ·
C. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor	Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	\rightarrow
City	State Zip Code	
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Polance at Class of This Da
Amount incurred this Period	rayment this renod	Outstanding Ralance at Close of This Pe
, , ,	3 3	, \ , , , ,
		, , ,
) SUBTOTALS This Period This Page (optional)		• , , , , , , , , , , , , , , , , , , ,
		_
t) TOTALS This Period (last page this line number or	ıly)	<u>•</u>
TOTAL OUTSTANDING LOANS (
TOTAL OUTSTANDING LOANS from Schedule C	(last page only)	, ,
) ADD 2) and 2) and carry forward to conservint "-	o of Summan, Doca Hart anna a-t-1	, , \
) ADD 2) and 3) and carry forward to appropriate lin	e or outilinary rage (last page only)	

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

20-6 - 10 - 15 - 03 - 00-104937

PAGE // OF /2

CAPA COUNTY REPUBLICAN		
Full Name of Payee		Date of Public Distribution/Dissemination
Mailing Address		Amount
City State	Zip Code	, , .
Purpose of Expenditure		Date of Disbursement or Obligation
y suppose or Experimenso	Category/ Type	
Name of Federal Candidate	Support C	Office Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date	C	Disbursement For: Primary General
Per Election for Office Sought		Other (specify)
Full Name of Payee		Date of Public Distribution/Dissemination
Mailing Address	\	Amount
City State	Zip Code	. , ,
		Date of Disbursement or Obligation
Purpose of Expenditure	Category/	M M / D D / Y Y
Name of Federal Candidate	·	Office Sought: House District:
Calendar Year-To-Date		Disbursement For: Primary Gener
Per Election for Office Sought	,	Other (specify)
a) SUBTOTAL of Itemized Independent Expenditures		
 SUBTOTAL of Unitemized Independent Expenditures 		
c) TOTAL Independent Expenditures	· · · · · · · · · · · · · · · · · · ·	, , ,
Inder penalty of perjury I certify that the independent experith, or at the request or suggestion of, any candidate or an early committee) any political party committee or its agent.	enditures reported herein were not uthorized committee or agent of e	t made in cooperation, consultation, or concer ither, or (if the reporting entity is that a political

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)

ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE PAGE 12 OF 12 FOR LINE 25 OF FORM 3X (To be used only by Political Committees in the General Election) NAME OF COMMITTEE (In Full) Check if 24-hour notice Nas your committee been designated to make Full Name of Subordinate Committee coordinated expenditures by a political party committee? NO If YES, name the designating committee: Mailing Address City ZIP Code State Full Name (Last, First, Middle Initial) of Each Payee Purpose of Expenditure Category/ Mailing Address Date State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Expenditure for this Candidate Full Name (Last, First, Middle Initial) of Each Payee Purpose of Expenditure Category/ Mailing Address Type State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate Presidential Aggregate General Election Expenditure for this Candidate > Full Name (Last, First, Middle Initial) of Each Payee Purpose of Expenditure Category/ Mailing Address Type Date City State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Expenditure for this Candidate SUBTOTAL of Expenditures This Page (optional)..... TOTAL This Period (last page this line number only).....

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2016 OCT 13 PM

Federal Election Commission 999 E Street, NW Washington D.C. 20463

2016 - 10 - 1M - 0M - 001049M9

אבל אטנפ נוסט סאוב בנסל

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
	Date of Receipt
Hand Delivered	
Postmarked USPS First Class Mail	Date of Receipt
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busines	ss Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Receipt or Postmarked
PREPARER D	UI316 DATE PREPARED
(3/2015)	