

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
Republican Majority Fund

ADDRESS (number and street) 901 N Washington St, Ste 700
Check if different than previously reported. (ACC) Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00296640
3. IS THIS REPORT NEW OR AMENDED
[X] (N) [ ] (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[X] April 15 Quarterly Report (Q1)
[ ] July 15 Quarterly Report (Q2)
[ ] October 15 Quarterly Report (Q3)
[ ] January 31 Year-End Report (YE)
[ ] July 31 Mid-Year Report (Non-election Year Only) (MY)
[ ] Termination Report (TER)
(b) Monthly Report Due On:
[ ] Feb 20 (M2) [ ] May 20 (M5) [ ] Aug 20 (M8) [ ] Nov 20 (M11) (Non-Election Year Only)
[ ] Mar 20 (M3) [ ] Jun 20 (M6) [ ] Sep 20 (M9) [ ] Dec 20 (M12) (Non-Election Year Only)
[ ] Apr 20 (M4) [ ] Jul 20 (M7) [ ] Oct 20 (M10) [ ] Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
[ ] Primary (12P) [ ] General (12G) [ ] Runoff (12R)
[ ] Convention (12C) [ ] Special (12S)
Election on M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
[ ] General (30G) [ ] Runoff (30R) [ ] Special (30S)
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2016 through 03 / 31 / 2016

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 Theodore Koch

Signature of Treasurer Theodore Koch [Electronically Filed] Date 04 / 15 / 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)

Write or Type Committee Name

**Republican Majority Fund**

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="2016"/>	<input type="text" value="56794.35"/>	<input type="text" value="56794.35"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="56794.35"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="97536.19"/>	<input type="text" value="97536.19"/>
(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="154330.54"/>	<input type="text" value="154330.54"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="85130.62"/>	<input type="text" value="85130.62"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="69199.92"/>	<input type="text" value="69199.92"/>
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)

Page 3

Write or Type Committee Name

**Republican Majority Fund**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2016 To: M M / D D / Y Y Y Y 03 / 31 / 2016

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).....	4500.00	4500.00
(ii) Unitemized .....	10279.17	10279.17
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	14779.17	14779.17
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	60500.00	60500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	75279.17	75279.17
12. Transfers From Affiliated/Other Party Committees.....	22257.02	22257.02
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	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))..... ▶	97536.19	97536.19
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	97536.19	97536.19

**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 .....	40130.62	40130.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	40130.62	40130.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	45000.00	45000.00
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)) ..	85130.62	85130.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	85130.62	85130.62

**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) .....	75279.17	75279.17
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	75279.17	75279.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	40130.62	40130.62
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	40130.62	40130.62

**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 31
	<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	

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)  
**Republican Majority Fund**

**A. JEROME ALFORD**  
Full Name (Last, First, Middle Initial)

Mailing Address 204 ALTA VISTA DR.

City MARION State AR Zip Code 72364

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

Name of Employer BOND CONSULTING ENGINEERS Occupation ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.101021

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

**B. PHILLIP BRUNS**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 7

City SHIRO State TX Zip Code 77876

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.101025

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

**C. CW3 BILLY CURL**  
Full Name (Last, First, Middle Initial)

Mailing Address 604 NORTH RIDGEWAY DR.

City BLYTHEVILLE State AR Zip Code 72315

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

Name of Employer BUSINESS OWNER/ARMY AVIATOR RETIREI Occupation BUSINESS OWNER/ARMY IRAQ VET

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.101022

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<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 31
	<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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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. PETER DUNN**  
Full Name (Last, First, Middle Initial)

Mailing Address 12587 FAIR LAKES CIRCLE, #345

City FAIRFAX	State VA	Zip Code 22033
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FEC ID number of contributing federal political committee. **C**

Name of Employer EL DORADO FEDERAL CENTER	Occupation OWNER
--	---------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA11.101029**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. MR. GARY R. GIBBS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1169 ROCKCREEK RD.

City HOT SPRINGS NATION	State AR	Zip Code 71913
----------------------------	-------------	-------------------

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA11.101028**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C. MR. PRESTON HENNE**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 RAVENWOOD ROAD

City HILTON HEAD ISLAND	State SC	Zip Code 29928-3380
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA11.101026**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000.00
<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 8 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. MR. DAVID E. HOFFMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5745 BOZEMAN DR.  
 City PLANO State TX Zip Code 75024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2016  
**Transaction ID : SA11.101019**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 CONTRIBUTION

**B. STEVEN HORNSTEIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 36 WESTWOOD LANE  
 City WOODBURY State NY Zip Code 11797  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GLOBAL CREDIT ADVISERS Occupation INVESTMENT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2016  
**Transaction ID : SA11.101027**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 CONTRIBUTION

**C. MR. JEFFREY B. LEWIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2464 BAYSHORE DR.  
 City NEWPORT BEACH State CA Zip Code 92663  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer APEX ASSET MANAGEMENT, INC. Occupation ASSET MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2016  
**Transaction ID : SA11.101023**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<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 31
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. SUZANNE H LIPSEY**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 7795

City AVON State CO Zip Code 81620-7795

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11.101020**

Amount of Each Receipt this Period  
 250.00

Memo Item  
 CONTRIBUTION

**B. ROGER LOTCHIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 108 BRIDLE RUN

City CHAPEL HILL State NC Zip Code 27514

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

Name of Employer PROFESSOR EMERITUS, UNC-CHAPEL HILL Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11.101024**

Amount of Each Receipt this Period  
 250.00

Memo Item  
 CONTRIBUTION

**C. MR. & MRS. JACKSON T. STEPHENS JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 111 CENTER STREET STE 1616

City LITTLE ROCK State AR Zip Code 72201-4418

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

Name of Employer EOE, INC. Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2016

**Transaction ID : SA11.100594A**

Amount of Each Receipt this Period  
 10000.00

Memo Item  
 CONTRIBUTION

CHARGED BACK \$10,000.00 ON 03/25/2016

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10500.00

**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:	PAGE 10 OF 31
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Republican Majority Fund**

**A. MR. & MRS. JACKSON T. STEPHENS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 111 CENTER STREET  
 STE 1616  
 City LITTLE ROCK State AR Zip Code 72201-4418  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EOE, INC. Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **0.00**

Date of Receipt **03 / 25 / 2016**  
**Transaction ID : SA11.100594B**  
 Amount of Each Receipt this Period **-10000.00**  
 Memo Item  
**CONTRIBUTION**  
**CHARGED BACK**

**B. MS. LISA M. WOLSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2618 S. LYNN STREET  
 City ARLINGTON State VA Zip Code 22202-2263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer G.E. Occupation SENIOR MANAGER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 29 / 2016**  
**Transaction ID : SA11.100212**  
 Amount of Each Receipt this Period **250.00**  
 Memo Item  
**CONTRIBUTION**

**C.**  
 Full Name (Last, First, Middle Initial)  
 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  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>-9750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>4500.00</b>

**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 11 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1120 CONNECTICUT AVENUE NW  
SUITE 600

City WASHINGTON State DC Zip Code 20036-3971

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2016

**Transaction ID : SA11.100213**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. AMERICAN FINANCIAL SERVICES ASSOCIATION PAC**

Mailing Address 919 18TH STREET NW STE. 300

City WASHINGTON State DC Zip Code 20006-5526

FEC ID number of contributing federal political committee. **C** C00038604

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

**Transaction ID : SA11.100706**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 25 MASSACHUSETTS AVE, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20001-7400

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

**Transaction ID : SA11.100701**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9500.00
<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 12 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN PODIATRIC MEDICAL ASSOCIATION PAC**

Mailing Address 9312 OLD GEORGETOWN RD

City	State	Zip Code
BETHESDA	MD	20814-1621

FEC ID number of contributing federal political committee. **C** C00008839

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2016

**Transaction ID : SA11.100220**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. BANK OF AMERICA CORPORATION FEDERAL PAC**

Mailing Address 1455 PENNSYLVANIA AVE, SUITE 950

City	State	Zip Code
WASHINGTON	DC	20004-1043

FEC ID number of contributing federal political committee. **C** C00364778

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 08 / 2016

**Transaction ID : SA11.100225**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGRO**

Mailing Address 1101 PENNSYLVANIA AVENUE NW #1000

City	State	Zip Code
WASHINGTON	DC	20004-2524

FEC ID number of contributing federal political committee. **C** C00008474

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
03 / 14 / 2016

**Transaction ID : SA11.100238**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<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 13 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. CONSUMER BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE, THE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1225 EYE STREET NW SUITE 550  
 City WASHINGTON State DC Zip Code 20005-5993  
 FEC ID number of contributing federal political committee. **C** C00035535  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 29 / 2016**  
**Transaction ID : SA11.100216**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**B. FIFTH THIRD BANCORP PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 545 E. TOWN STREET  
 City COLUMBUS State OH Zip Code 43215-4801  
 FEC ID number of contributing federal political committee. **C** C00290502  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **03 / 31 / 2016**  
**Transaction ID : SA11.100702**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

**C. FINANCIAL SERVICES ROUNDTABLE PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 13TH ST STE 400  
 City WASHINGTON State DC Zip Code 20005-3008  
 FEC ID number of contributing federal political committee. **C** C00193177  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **03 / 14 / 2016**  
**Transaction ID : SA11.100239**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<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 14 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2941 FAIRVIEW PARK DR.  
 SUITE 100  
 City Falls Church State VA Zip Code 22042-4541  
 FEC ID number of contributing federal political committee. **C** C00078451  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016  
**Transaction ID : SA11.100214**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**B. GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE-FEDERAL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1299 PENNSYLVANIA AVE NW  
 SUITE 900  
 City Washington State DC Zip Code 20004-2414  
 FEC ID number of contributing federal political committee. **C** C00024869  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 16 / 2016  
**Transaction ID : SA11.100201**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**C. HUNTINGTON INGALLS INDUSTRIES, INC. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 M STREET SE, SUITE 350  
 City Washington State DC Zip Code 20003-3436  
 FEC ID number of contributing federal political committee. **C** C00325092  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016  
**Transaction ID : SA11.100767**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<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 15 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. JPMORGAN CHASE & CO. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 601 PENNSYLVANIA AVENUE NW FLOOR 7  
 City WASHINGTON State DC Zip Code 20004-2601  
 FEC ID number of contributing federal political committee. **C** C00104299  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 29 / 2016  
**Transaction ID : SA11.100605**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

**B. MARSH & MCLENNAN COMPANIES, INC PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1166 AVENUE OF THE AMERICAS  
 City NEW YORK State NY Zip Code 10036-2708  
 FEC ID number of contributing federal political committee. **C** C00457234  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2016  
**Transaction ID : SA11.100705**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**C. MORPAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1919 M. STREET NW 5TH FL.  
 City WASHINGTON State DC Zip Code 20036-3572  
 FEC ID number of contributing federal political committee. **C** C00004812  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 29 / 2016  
**Transaction ID : SA11.100218**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<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 16 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

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

Mailing Address 1919 M. STREET NW 5TH FL.

City WASHINGTON State DC Zip Code 20036-3572

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2016

**Transaction ID : SA11.100219**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC**

Mailing Address 3601 VINCENNES ROAD

City INDIANAPOLIS State IN Zip Code 46268-1154

FEC ID number of contributing federal political committee. **C** C00170258

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2016

**Transaction ID : SA11.100217**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 25 MASSACHUSETTS AVENUE NW  
SUITE 100

City WASHINGTON State DC Zip Code 20001-1434

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

**Transaction ID : SA11.100704**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5500.00
<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 17 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

Full Name (Last, First, Middle Initial)  
**A. NTRA PAC INC.**

Mailing Address **2525 HARRODSBURG RD**

City **LEXINGTON** State **KY** Zip Code **40504-3355**

FEC ID number of contributing federal political committee. **C C00360008**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**03 / 14 / 2016**

**Transaction ID : SA11.100240**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**B. REGIONS FINANCIAL CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address **1015 15TH STREET NW  
SUITE 920**

City **WASHINGTON** State **DC** Zip Code **20005-2623**

FEC ID number of contributing federal political committee. **C C00432252**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**03 / 31 / 2016**

**Transaction ID : SA11.100703**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**C. UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT**

Mailing Address **700 13TH STREET NW STE. 350**

City **WASHINGTON** State **DC** Zip Code **20005-3960**

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**02 / 29 / 2016**

**Transaction ID : SA11.100215**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>15000.00</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: PAGE 18 OF 31  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

Full Name (Last, First, Middle Initial)  
**A. WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT**

Mailing Address 702 S.W. 8TH STREET

City BENTONVILLE State AR Zip Code 72716-6209

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2016

**Transaction ID : SA11.100766**

Amount of Each Receipt this Period  
 3000.00

Memo Item  
**CONTRIBUTION**

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

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	60500.00

**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 19 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

Full Name (Last, First, Middle Initial)  
**A. COTTON VICTORY**

Mailing Address 901 N WASHINGTON ST

City State Zip Code  
ALEXANDRIA VA 22314-5509

FEC ID number of contributing federal political committee. **C** C00571018

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
22257.02

Date of Receipt  
03 / 31 / 2016  
**Transaction ID : SA12.100610**

Amount of Each Receipt this Period  
22257.02

Memo Item  
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

Full Name (Last, First, Middle Initial)  
**B. MR. EDWARD M. CZUKER**

Mailing Address 121 S. BEVERLY DRIVE

City State Zip Code  
BEVERLY HILLS CA 90212-3002

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

Name of Employer Occupation  
LEGADO COMPANIES C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4600.00

Date of Receipt  
02 / 26 / 2016  
**Transaction ID : SA12.100655**

Amount of Each Receipt this Period  
4600.00

Memo Item  
TRANSFER MEMO

JFC ATTRIB: COTTON VICTORY

Full Name (Last, First, Middle Initial)  
**C. MR. LAWRENCE E. FEIGEN**

Mailing Address 336 S. HUDSON AVENUE

City State Zip Code  
LOS ANGELES CA 90020-4804

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

Name of Employer Occupation  
SNF MANAGEMENT OWNER/C.O.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4600.00

Date of Receipt  
02 / 26 / 2016  
**Transaction ID : SA12.100656**

Amount of Each Receipt this Period  
4600.00

Memo Item  
TRANSFER MEMO

JFC ATTRIB: COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	22257.02
<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 20 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. ERICA GERSON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 225 W 86 APT 1112

City NEW YORK	State NY	Zip Code 10024-3334
------------------	-------------	------------------------

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

Name of Employer SELF EMPLOYED	Occupation RABBI
-----------------------------------	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2016

**Transaction ID : SA12.100653**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER MEMO

JFC ATTRIB: COTTON VICTORY

**B. MARK GERSON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 225 W 86 APT 1112

City NEW YORK	State NY	Zip Code 10024-3334
------------------	-------------	------------------------

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

Name of Employer 6L6	Occupation CHAIRMAN
-------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2016

**Transaction ID : SA12.100652**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER MEMO

JFC ATTRIB: COTTON VICTORY

**C. FRANK PRICE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 18434 COASTLINE DR.

City MALIBU	State CA	Zip Code 90265-5707
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2016

**Transaction ID : SA12.100657**

Amount of Each Receipt this Period  
4600.00

Memo Item  
TRANSFER MEMO

JFC ATTRIB: COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 21 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN G. RANGOS SR.**

Mailing Address 701 OSPREY POINT CIRCLE

City BOCA RATON	State FL	Zip Code 33431-5245
--------------------	-------------	------------------------

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

Name of Employer SELF EMPLOYED	Occupation BUSINESSMAN
-----------------------------------	---------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4600.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
02	/	23	/	2016

**Transaction ID : SA12.100654**

Amount of Each Receipt this Period  
4600.00

Memo Item  
TRANSFER MEMO

JFC ATTRIB: COTTON VICTORY

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

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	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

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

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	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	22257.02

**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)  
**Republican Majority Fund**

Full Name (Last, First, Middle Initial)

**A. LAURA RIZZO**

Mailing Address 1316 ALEXANDRIA AVENUE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement  
PAC FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2016

Transaction ID : SB21B.I1633

Amount of Each Disbursement this Period

7750.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ALTRIA CLIENT SERVICES, LLC**

Mailing Address 101 CONSTITUTION AVE, NW  
SUITE 400W

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
PAC FUNDRAISING VENUE/TICKETS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 22 / 2016

Transaction ID : SB21B.I1629

Amount of Each Disbursement this Period

3750.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address P.O. BOX 619616  
DFW AIRPORT

City DALLAS State TX Zip Code 75261

Purpose of Disbursement  
PAC TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 07 / 2016

Transaction ID : SB21B.I1612

Amount of Each Disbursement this Period

73.10

Memo Item

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

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

11573.10

**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)  
**Republican Majority Fund**

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address P.O. BOX 619616  
DFW AIRPORT

City DALLAS State TX Zip Code 75261

Purpose of Disbursement  
PAC TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 25 / 2016

**Transaction ID : SB21B.I1618**

Amount of Each Disbursement this Period

613.70

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address P.O. BOX 619616  
DFW AIRPORT

City DALLAS State TX Zip Code 75261

Purpose of Disbursement  
PAC TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 01 / 2016

**Transaction ID : SB21B.I1621**

Amount of Each Disbursement this Period

654.60

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address P.O. BOX 619616  
DFW AIRPORT

City DALLAS State TX Zip Code 75261

Purpose of Disbursement  
PAC TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 16 / 2016

**Transaction ID : SB21B.I1624**

Amount of Each Disbursement this Period

472.44

Memo Item

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

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

1740.74

**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)  
**Republican Majority Fund**

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address P.O. BOX 619616  
DFW AIRPORT

City DALLAS State TX Zip Code 75261

Purpose of Disbursement  
PAC TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2016

Transaction ID : SB21B.I1625

Amount of Each Disbursement this Period

896.73

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address P.O. BOX 619616  
DFW AIRPORT

City DALLAS State TX Zip Code 75261

Purpose of Disbursement  
PAC TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 29 / 2016

Transaction ID : SB21B.I1630

Amount of Each Disbursement this Period

756.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN SOLUTIONS**

Mailing Address 117 N SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC WEBSITE/DIGITAL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2016

Transaction ID : SB21B.I1638

Amount of Each Disbursement this Period

15000.00

Memo Item

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

16652.93

**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 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)  
**Republican Majority Fund**

Full Name (Last, First, Middle Initial)

**A. CONNELL DONATELLI, INC.**

Mailing Address P.O. BOX 1877

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement  
PAC WEBSITE/FACEBOOK

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 23 / 2016

Transaction ID : SB21B.I1635

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. DELTA AIRLINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
PAC TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2016

Transaction ID : SB21B.I1623

Amount of Each Disbursement this Period

874.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. FOLEY & LARDNER, LLP**

Mailing Address 3000 K ST NW, STE 600

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement  
PAC LEGAL SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 18 / 2016

Transaction ID : SB21B.I1614

Amount of Each Disbursement this Period

60.00

Memo Item

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

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

1934.20

**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)  
**Republican Majority Fund**

Full Name (Last, First, Middle Initial)

**A. FOLEY & LARDNER, LLP**

Mailing Address 3000 K ST NW, STE 600

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement  
PAC LEGAL SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 21 / 2016

Transaction ID : SB21B.I1634

Amount of Each Disbursement this Period

207.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. JET BLUE**

Mailing Address 27-01 QUEENS PLAZA NORTH

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement  
PAC TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 14 / 2016

Transaction ID : SB21B.I1613

Amount of Each Disbursement this Period

168.10

Memo Item

Full Name (Last, First, Middle Initial)

**C. JET BLUE**

Mailing Address 27-01 QUEENS PLAZA NORTH

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement  
PAC TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 25 / 2016

Transaction ID : SB21B.I1617

Amount of Each Disbursement this Period

496.10

Memo Item

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

871.20

**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 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)  
**Republican Majority Fund**

Full Name (Last, First, Middle Initial)

**A. KOCH & HOOS LLC**

Mailing Address 901 N WASHINGTON ST STE 700

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC ACCOUNTING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : SB21B.I1636

Amount of Each Disbursement this Period

2604.80

Memo Item

Full Name (Last, First, Middle Initial)

**B. O'DONNELL AND ASSOCIATES, LTD.**

Mailing Address 3101 N HAMPTON DR, #1517

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement  
PAC COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 04 / 2016

Transaction ID : SB21B.I1610

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. O'DONNELL AND ASSOCIATES, LTD.**

Mailing Address 3101 N HAMPTON DR, #1517

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement  
PAC COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 02 / 2016

Transaction ID : SB21B.I1622

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4604.80

**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 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)  
**Republican Majority Fund**

Full Name (Last, First, Middle Initial)

**A. O'DONNELL AND ASSOCIATES, LTD.**

Mailing Address 3101 N HAMPTON DR, #1517

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement  
PAC COMMUNICATIONS CONSULTING

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  
02 / 29 / 2016

Transaction ID : SB21B.I1631

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. O'DONNELL AND ASSOCIATES, LTD.**

Mailing Address 3101 N HAMPTON DR, #1517

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement  
PAC COMMUNICATIONS CONSULTING

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  
03 / 31 / 2016

Transaction ID : SB21B.I1637

Amount of Each Disbursement this Period

1000.00

Memo Item

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

Memo Item

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

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

2000.00

39376.97

**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 checked="" 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)  
**Republican Majority Fund**

Full Name (Last, First, Middle Initial)

**A. BOOZMAN FOR ARKANSAS**

Mailing Address PO BOX 671

City State Zip Code  
ROGERS AR 72757

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**JOHN BOOZMAN**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: AR District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 01 / 2016

Transaction ID : **SB23.I1639**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF ROY BLUNT**

Mailing Address PO BOX 10178

City State Zip Code  
COLUMBIA MO 65205

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**ROY BLUNT**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: MO District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 16 / 2016

Transaction ID : **SB23.I1643**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. GRASSLEY COMMITTEE INC**

Mailing Address PO BOX 1000

City State Zip Code  
DES MOINES IA 50304

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**CHARLES E GRASSLEY SENATOR**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 23 / 2016

Transaction ID : **SB23.I1644**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Republican Majority Fund**

Full Name (Last, First, Middle Initial)

**A. MIKE CRAPO FOR US SENATE**

Mailing Address PO BOX 1948

City BOISE State ID Zip Code 83701

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**MICHAEL D CRAPO**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: ID District:

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2016

Transaction ID : **SB23.I1642**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. PORTMAN FOR SENATE COMMITTEE**

Mailing Address 825 MIAMI AVENUE

City TERRACE PA State OH Zip Code 45174

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**ROB PORTMAN**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: OH District:

Date of Disbursement

MM / DD / YYYY  
03 / 07 / 2016

Transaction ID : **SB23.I1640**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. RAND PAUL FOR US SENATE 2016**

Mailing Address PO BOX 72928

City NEWPORT State KY Zip Code 41072

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**RAND PAUL**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: KY District:

Date of Disbursement

MM / DD / YYYY  
03 / 30 / 2016

Transaction ID : **SB23.I1645**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Republican Majority Fund**

Full Name (Last, First, Middle Initial)

**A. NRSC**

Mailing Address 425 2ND STREET NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
CONTRIBUTION

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  
03 / 08 / 2016

**Transaction ID : SB23.I1641**

Amount of Each Disbursement this Period

15000.00

Memo Item

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

Memo Item

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

Memo Item

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

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

15000.00

45000.00