FEC FORM 3X

Only

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED 2011 FEB -2 AM 9: 13 FEC MAIL CENTER

Rev. 12/2004

Office Use Only TYPE OR PRINT ▼ Example: If typing, type NAME OF 12FE4M5 COMMITTEE (in full) over the lines. INAPA: COUNTY REPUBLICAN CENTRAL COMMITTEE 4166 BURGUNDY WAY ADDRESS (number and street) Check if different than previously MARA reported. (ACC) FEC IDENTIFICATION NUMBER ▼ CITY A STATE A ZIP CODE 3. IS THIS NEW **AMENDED** C 00455659 OR REPORT (N) (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Year Only) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report (Q1) (c) General (12G) 12-Day Primary (12P) Runoff (12R) July 15 **PRE-Election** Quarterly Report (Q2) Convention (12C) Special (12S) Report for the: October 15 Quarterly Report (Q3) in the January 31 State of Election on Year-End Report (YE) July 31 Mid-Year (d) 30-Day Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report in the (TER) State of Election on 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. BLEVINS 70 ZEBH Type or Print Name of Treasurer Joseph Blum Date 01-23-2011 Signature of Treasurer 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 **FEC FORM 3X** Use

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NAPA COUNTY REPUBLICAN CENTRAL COMMITTEE

Report Covering the Period:

From:

11" 23 2010

	COLUMN A This Period	COLUMN B Calendar Year-to-Date	
(a) Cash on Hand January 1, ZŠŽO		, 2,5.50.0 0	
(b) Cash on Hand at Beginning of Reporting Period	, <i>153</i> 3.00		
(c) Total Receipts (from Line 19)	, , , 00 .	, ,175.00	
(d) Subtotal (add Lines 6(b) and 6(c) for Celuttin A and Lines 6(a) and 6(c) for Column B)	, <i>4533.0</i> 0	, 2695.0 0	
Total Disbursements (from Line 31)	, , 00	, //62.00	
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	, 1 <i>53,3.0</i> 0	, <i>1,533.0</i> 0	
Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	, , <i>00</i>		
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	, , <i>OO</i>		
	January 1, Z520 (b) Cash on Hand at Beginning of Reporting Period	(a) Cash on Hand January 1, ZSZO (b) Cash on Hand at Beginning of Reporting Period, , , , , , ,	

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

Page 3

Write or Type Committee Name

(J)

N

3000

0

NAPA COUNTY REPUBLICAN CENTRAL COMMITTEE

。 2 3 12 31 2010 7*010* To: Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees $, oo.\infty$,00.00 (i) Itemized (use Schedule A)..... . 00.00 ,00.00 (ii) Unitemized (iii) TOTAL (add , DO .CD . BB.D Lines 11(a)(i) and (ii).....▶ , *ao*. ∞ 00.00 (b) Political Party Committees (c) Other Political Committees 00.00 ω . ∞ (such as PACs)..... Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry ,00.00 000 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other ,00,00 , O O .OO Party Committees..... 13. All Loans Received ,00.00 ,00.0 00.00 14. Loan Repayments Received..... ,00 .00 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... ,00 .00 .00.00 16. Refunds of Contributions Made to Federal Candidates and Other , O O D O . Political Committees..... 00.00 17. Other Federal Receipts (Dividends, Interest, etc.)..... ,00.00 α 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account ,000 00.00 (from Schedule H3)..... (b) Levin Funds (from Schedule H5) ,0000 ∞ .00 (c) Total Transfers (add 18(a) and 18(b))... .*00.0*0 . *a o .*∞ 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))....... , 00.00

,00.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)▶

,00 DO

00.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		Disbursements COLUMN A Total This Period	
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date
	(i) Federal Share	, , <i>O.00</i>	, , <i>a.0</i> 0
	(ii) Non-Federal Share	, , O. O	, , 0.0 0
	(b) Other Federal Operating Expenditures	, , <i>O. 0</i> 0	9/2.00
	(c) Total Operating Expenditures	, , 	, , , , , , , , , , , , , , , , ,
	(add 21(a)(l), (a)(ii), and (b))▶	, , <i>O.O</i> O	, , 9/2.00
22.	Transfers to Affiliated/Other Party		•
23.	Contributions to	, , 0.00	, , <i>O.O</i> O
	Federal Candidates/Committees and Other Political Committees	, , <i>O.0</i> 0	0.00
<u>.</u> 4.	Independent Expenditures		, , ,
25.	(use Schedule E)	, , <i>O.O</i> C)	, ,250.00
	(use Schedule F)	, , <i>O. 0</i> 0	, , <i>O. 0</i> 0
26.	Loan Repayments Made	, , <i>O. O</i> 0	, , 0.0 0
27.	Loans Made	, , Ο. <i>Ω</i> Ο	, , <i>a.do</i>
28.	Refunds of Contributions To: (a) Individuals/Persons Other	, , , , , , , , , , , , , , , , , , , ,	, , , , ,
	Than Political Committees	, , 0.20	, , <i>0 .00</i>
	(h) Delitical Danks Comprisite	0.40	0.00
	(b) Political Party Committees(c) Other Political Committees	, , <i>O</i> .60	, , 0,00
	(such as PACs)	, , Δ. ω	, , .0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	, , Δ.Δ	, , Δ.ω
29.	Other Disbursements	, 0.06	, , Δ.Δ Ο
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)	0.4.0	. 0.0
	(i) Federal Share	, , ΔΔΩ «	, , 0.00
	(il) "Levin" Share	, , <i>O</i> .00	, , 0.00
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds	, , 0.0 0	, , Δ. Δ
	(c) Total Faderal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	, , D.	, , . 00
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	, , O-00	, 4/62.00
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	·	
	from Line 31)	, , 0.00	, 1,162.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	OI DISU	urseme	its		Page 5
Net Contributions/Operating Expenditures	COLUMN A Total This Period			DLUMN B ur Year-to-Date	
Total Contributions (other than loans) (from Line 11(d), page 3)	,	,	0.00	,	, 0,00
Total Contribution Refunds (from Line 28(d))	,	7	0.00	,	, 0.00
Net Contributions (other than loans) (subtract Line 34 from Line 33)	3	,	0,00	,	,175.00
Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	,	,	0.00	,	1,162.00
Offsets to Operating Expenditures (from Line 15, page 3)	,	. ,	0.00	7	, D.
Net Operating Expenditures (subtract Line 37 from Line 36)	,	,	۵,۵0	,	1162.00
	Net Contributions/Operating Expenditures Total Contributions (other than loans) (from Line 11(d), page 3)	FEC Form 3X (Rev. 02/2003) Net Contributions/Operating Expenditures Total Contributions (other than loans) (from Line 11(d), page 3), Total Contribution Refunds (from Line 28(d)), Net Contributions (other than loans) (subtract Line 34 from Line 33), Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	FEC Form 3X (Rev. 02/2003) Net Contributions/Operating Expenditures Total Contributions (other than loans) (from Line 11(d), page 3)	Net Contributions/Operating Expenditures Total Contributions (other than loans) (from Line 11(d), page 3)	Net Contributions/Operating Expenditures Total Contributions (other than loans) (from Line 11(d), page 3) , , , , , , , , , , , , , , , , , ,

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 6 OF 12. (check only one)
:	Detailed Summary Page	11a 11b 11c 12
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	ents may not be sold or used by any pee, and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	·	
NAPA COUNTY TREPUT	BLICAN CENTRAL	COMMITTEE
Full Name (Last, First, Middle Initial)	,	
A. Mailing Address		Date of Receipt
		The second of th
City s	tate Zip Code	Amount of Each Receipt this Period
	and the second of the second s	The second of th
Name of Employer Occ	cupation	
Primary General Other (specify)	gregate Year-to-Date V Topinka an again a	1.75 (
Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		Burkey Vagencer Value of Automobile
City S	tale Zip Code	- In the state of
	in the state of th	Amount of Each Receipt this Period
federal political committee.		Leave with allow to with Mountained with the found
Name of Employer Occ	cupation	
Primary General	gregate Year-to-Date V	
Full Name (Last, First, Middle Initial)		
C. Mailing Address		Date of Receipt
City	tate Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing tederal political committee.	y some general grave grave graves of the source of the sou	Township of the South Control and the South
Name of Employer Occ	cupation	7
Primary General Other (specify)	gregate Year-to-Date ▼ All the state of th	
SUBTOTAL of Receipts This Page (optional)		A second of the

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

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SCHEDULE B (FEC Form 3X) PAGE of 12 FOR LINE NUMBER: Use separate schedule(s) (check only one) **ITEMIZED DISBURSEMENTS** for each oategory of the 21b 23 24 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b 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) NAPA COUNTY REPUBLICAN CENTRAL COMMITTEE ull Name (Last, First, Middle Initial) **Date of Disbursement** M / D D Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) B. **Date of Disbursement Mailing Address** City State Purpose of Distaursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Senate General **Primary** President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: General Senate **Primary** President Other (specify)

State:

District:

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

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

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the

PAGE 8 OF 12

FOR LINE 13 OF FORM 3X **Detailed Summary Page** NAME OF COMMITTEE (In Full) NAPA LOUNTY REPUBLICAN CENTRAL COMMITTEE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: **Primary** General Mailing Address Other (specify) City State ZIP Code Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period the first transfer of the sandar transfer of the first transfer of the first transfer of the first transfer of Jan Sandon Sandan and the set of \$4 Or St. Broken in TERMS Date Incurred Date Due Interest Rate Secured: Yes Land Com. 1 % (apr) Landle - Landeller et Section . Francisco de Americani. List All Endorsers or Guarantors (K any) to Loan Source 1. Full Name (Last, First, Middle Initial Name of Employer Mailing Address Occupation the little with the second control of a street participating and Amount -City . State Guaranteed Barred walker William or the Brown will be with Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Bright Braudiger of Brain in hour it is removed hit that with medicines of the Amount City State ZIP Code Guaranteed handlemakki Morris i sakar Mandamikan Borika sa Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code City State Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount a magazinega ang ini City State ZIP Code Guaranteed San Street Outstanding: SUBTOTALS This Period This Page (optional)..... TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary)

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

Supplementary for Information found on Page 6 of Schedule C

rederal Election Commission, Washington, D.C. 20463					
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER			
NAPA COUNTY ZEPUBLIC	AN CENTRAL CON	MM. South of the distriction is the stand			
ENDING INSTITUTION (LENDER) Full Name	Amount of Loan	Interest Rate (APR)			
Mailing Address		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)			
City State Zip Code	Date Incurred or Established Date Due	- Marin V D V D V V V V V V V V V V V V V V V			
A. Has loan been restructured? No Yes	If yes, date originally incurred	The last land land land land			
B. If line of credit, Amount of this Draw:	Balance:	go anago se agra, agra ansag a sa gous engan anggan ang anas gous agran ga Manarikan adalah sa se di ang dimandina di sa akun adalah di anadan adalah sa di			
C. Are other parties secondarily liable for the debt incur	red? ust be reported on Schedule C.)				
property, goods, negotiable instruments, certificates of	property, goods, negotiable instruments, certificates of deposit, shattel papers, stocks, accounts receivable, cash on deposit or other similar traditional collateral? No Yes If yes, specify:				
	<u> </u>	Does the lender have a perfected security interest in it? No Yes			
E. Are any future contributions or future receipts of inter collateral for the loan? No Yes If yes,		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 we the loan amount, state the basis upon which this loan	as pledged for this loan, or it the a was made and the basis on whi	amount pledged does not equal or exceed ch it assures repayment.			
G. COMMITTEE TREASURER		DATE			
Typed Name Signature		gravity - inquired granges (gravity mil			
H. Attach a signed copy of the loan agreement.					
TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the teare accurate as stated above. The loan was made on terms and conditions (in similar extensions of credit to other borrowers of the requirement that	cluding interest rate) no more fav f comparable credit worthiness.	orable at the time than those imposed for			
complied with the requirements set forth at 11 C	III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.				
AUTHORIZED REPRESENTATIVE		DATE			
Typed Name Signature Ti	ile	The state of the s			

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

(Use separate schedule(s)

PAGE 10 OF 12 FOR L

LINE NUMBER:		
only one)		9
	П	10

xcluding Loans	numbered line)
NAME OF COMMITTEE (In Full)	
NAPA COUNTY BEPUBLICAN CENTRAL	COMMITTEE
Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Andress	
City State Zip Code	
Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zin Code	
Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period	
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 Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
and the second s	
) SUBTOTALS This Period This Page (optional)	The state of the s
TOTALS This Period (last page this line number only)	
TOTAL OUTSTANDING LOANS from Schedule C (last page only)	and the second of the second o
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page or	

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

EMIZED INDEPENDENT EXPENDITURES	FOR LINE 24 OF FORM 3X
AME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
NAPA COUNTY PEPUBLICAN CENTRAL COMMIT	C 00455659
Check if 24-hour notice 48-hour notice	
Rull Name (Last, First, Middle Initial) of Payee	Date
	THE THE VEHICLE COMMENT OF THE VEHICLE OF THE
Mailing Address	M. J. W. V. S. P. C. D. V. J. J. A.
	Amount
City State Zip Code	strate and reflective relative to the second section of the second section of the second section of the second section section section sections are second sections as the second section sect
	A STATE OF THE STA
Rurpose of Expenditure	Office Sought: House State:
Category 3	Consta
Type 2 - Paradianes	President District:
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
	Опосительной подражиться подра
Calendar Year-To-Date Per Election ्रिक्टिक्ट प्रिक्ट प्रिक प्रिक प्रिक प्रिक्ट प्रिक प्रिक प्रिक प्रिक प्रिक	Disbursement For: Primary General
for Office Sough	Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	THE STATE OF THE S
1	Amount
City State Zip Code	gan gan kelenggan yang mejalangki ngabeng menen
State Zip Code	The observation of the order of the color of
Purpose of Expenditure	Office Sought: House State:
The state of the s	Consts —
Nome of Forders Condidate Supported or Conceed by Expenditure	President District:
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
Calendar Year-To-Date Per Election	Disbursement For: Primary General
for Office Sought	Other (specify)
	\
(a) SUBTOTAL of Itemized Independent Expenditures	and the section of the reference of the section of
	The state of the college of the coll
(b) SUBTOTAL of Unitemized Independent Expenditures	the Arthresia well-with index who straight in Franch
	The collection of the continue of the cost of continue the continue of the
(c) TOTAL Independent Expenditures	kuna lain din ang amikano, sana kano dina sistan dan di sana'i
	The a three-dense Roman on the a throught a calculation of the contract
Under penalty of perjury I certify that the independent expenditures reported herein were r	not made in cooperation, consultation, or concert
with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	r either, or (if the reporting entity)'s not a political
,	
	Caralina A Caral Caral A Caral A Caral A Caral
Signature	Constituent for a constituent beautiful to the constituent of the cons

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 (2 U.S.C. §441a(d)) 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 NAPA COUNTY REPUBLICAN CONTRAL COMMITTEE Full Name of Subordinate Committee has your committee been designated to make coordinated expenditures by a political party committee? YES ☐ NO If YES, name the designating committee: Mailing Address State ZIP Code City Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Type Mailing Address Date FREE COLOUR ME ME City Zip Code State Name of Federal Candidate Supported Office Sought: House State: **Amount** Senate District: to the process of a second process of the second Presidential Box II or Brown Brown a street Brown San San F. . Aggregate General Election Limit Raised Due to Opponent's Spend-Expenditure for this Candidate ing (2 U.S.C. §441a(i)/441a-1) Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Type Date City State Zip Còde Maria Maria A salah dari Name of Federal Candidate Supported Office Sought: House State: **Amount** Senate District: Presidential Same and the state of the state Aggregate General Election Limit Raised Due to Opponent's Spend-Expenditure for this Candidate ing (2 U.S.C. §441a(i)/441a-1) ารไรทร์ ที่โดยเป็นสายในสายให้สายให้สายให้สายเส้น สายให้สายให้สายให้ Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Type Mailing Address Date City State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Limit Raised Due to Opponent's Spend-Expenditure for this Candidate and the sail of th ing (2 U.S.C. §441a(i)/43(a-1) SUBTOTAL of Expenditures This Page (optional)...... TOTAL This Period (last page this line number only).....

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NO OTHER SCHEDULES APPLICATILE

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