

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.
Republican Majority Fund

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

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 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 / / in the State of
(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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 V. Koch

Signature of Treasurer Theodore V. Koch [Electronically Filed] Date / /

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="2014"/>		64332.54
(b) Cash on Hand at Beginning of Reporting Period.....	61046.27	
(c) Total Receipts (from Line 19)	32098.29	129131.52
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	93144.56	193464.06
7. Total Disbursements (from Line 31).....	54866.36	155185.86
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	38278.20	38278.20
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

Write or Type Committee Name

Republican Majority Fund

Report Covering the Period: From: 06 / 01 / 2014 To: 06 / 30 / 2014

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).....	0.00	21600.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)..... ▶	0.00	21600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs).....	10000.00	72504.01
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	10000.00	94104.01
12. Transfers From Affiliated/Other		
Party Committees.....	22098.21	35023.96
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.).....	0.08	3.55
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))..... ▶	32098.29	129131.52
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)..... ▶	32098.29	129131.52

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	4866.36	61685.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4866.36	61685.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	50000.00	93500.00
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)) ..	54866.36	155185.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	54866.36	155185.86

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)	10000.00	94104.01
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10000.00	94104.01
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	4866.36	61685.86
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4866.36	61685.86

**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 17
<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

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

Full Name (Last, First, Middle Initial) A. New York Life Insurance Co PAC		Date of Receipt
Mailing Address 51 Madison Ave, Room 1109		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code New York NY 10010-1603		Transaction ID : 40703.C2221
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00158881"/>		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer	Occupation	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) B. The Home Depot Inc. PAC		Date of Receipt
Mailing Address 1155 F St NW Ste 400		<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City State Zip Code Washington DC 20004		Transaction ID : 40602.C2201
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00284885"/>		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer	Occupation	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code		
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="10000.00"/>

**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 7 OF 17
<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. Monday Meeting PAC
Full Name (Last, First, Middle Initial)
Mailing Address 228 S Washington St, Ste 115

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

FEC ID number of contributing federal political committee. **C** C00494567

Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 13732.29

Date of Receipt
MM / DD / YYYY
06 / 04 / 2014
Transaction ID : 40703.C2204

Amount of Each Receipt this Period
806.54

Transfers From Affil./Auth.

Note: Trans of Jt Fdr Proceeds

B. Kenneth J. Kies
Full Name (Last, First, Middle Initial)
Mailing Address 6109 Franklin Park Road

City McLean	State VA	Zip Code 22101-
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FEC ID number of contributing federal political committee. **C**

Name of Employer Federal Policy Group	Occupation Managing Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2014
Transaction ID : 40703.C2208

Amount of Each Receipt this Period
250.00

Transfer Memo

[MEMO ITEM]

C. James W. Hawkins III
Full Name (Last, First, Middle Initial)
Mailing Address 2604 N Nelson St

City Arlington	State VA	Zip Code 22207-
-------------------	-------------	--------------------

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

Name of Employer Alpine Group	Occupation Partner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
04 / 17 / 2014
Transaction ID : 40703.C2205

Amount of Each Receipt this Period
250.00

Transfer Memo

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....	806.54
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: (check only one)	PAGE 8 OF 17
<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. James W. Hawkins III
 Full Name (Last, First, Middle Initial)
 Mailing Address 2604 N Nelson St
 City Arlington State VA Zip Code 22207-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Alpine Group Partner
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : 40703.C2207
 Amount of Each Receipt this Period
 500.00
 Transfer Memo
[MEMO ITEM]

B. Jeffrey M. Walter
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 7061
 City Alexandria State VA Zip Code 22307-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The Walter Group Government Relations
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2014
Transaction ID : 40703.C2206
 Amount of Each Receipt this Period
 250.00
 Transfer Memo
[MEMO ITEM]

C. RMF-NCF-Dakota 2014 Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address 228 S Washington St Ste 115
 City Alexandria State VA Zip Code 22314-
 FEC ID number of contributing federal political committee. **C** C00562900
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 21291.67

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : 40703.C2210
 Amount of Each Receipt this Period
 21291.67
 Transfers From Affil./Auth.
 Note: Trans of Jt Fdr Proceeds

SUBTOTAL of Receipts This Page (optional).....▶	21291.67
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: (check only one)	PAGE 9 OF 17
<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. American Assoc. of Orthodontists PAC

Mailing Address 401 N Lindbergh Blvd

City State Zip Code
Saint Louis MO 63141-

FEC ID number of contributing federal political committee. **C C00293910**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 10 / 2014
Transaction ID : 40703.C2214

Amount of Each Receipt this Period
1000.00

Transfer Memo
[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. American Dental PAC

Mailing Address 1111 14th Street, NW, Ste. 1100

City State Zip Code
Washington DC 20005-

FEC ID number of contributing federal political committee. **C C00000729**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 12 / 2014
Transaction ID : 40703.C2215

Amount of Each Receipt this Period
1000.00

Transfer Memo
[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. Pinnacle West PAC

Mailing Address 801 Pennsylvania Ave NW Ste 214

City State Zip Code
Washington DC 20004-2680

FEC ID number of contributing federal political committee. **C C00015933**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2014
Transaction ID : 40703.C2219

Amount of Each Receipt this Period
1000.00

Transfer Memo
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	0.00
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: (check only one)	PAGE 10 OF 17
<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. Equifax Inc. PAC

Mailing Address 1550 Peachtree St NW

City Atlanta State GA Zip Code 30309-

FEC ID number of contributing federal political committee. **C** C00143867

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 06 / 17 / 2014
Transaction ID : 40703.C2216

Amount of Each Receipt this Period
 1000.00

Transfer Memo
[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Bruce Gates

Mailing Address 4135 Seminary Rd

City Alexandria State VA Zip Code 22304-

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

Name of Employer Occupation
 Altria Sr. Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 06 / 19 / 2014
Transaction ID : 40703.C2217

Amount of Each Receipt this Period
 5000.00

Transfer Memo
[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. Joyce H. Gates

Mailing Address 4135 Seminary Rd

City Alexandria State VA Zip Code 22304-

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

Name of Employer Occupation
 Warehouse Productions Managing Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 06 / 19 / 2014
Transaction ID : 40703.C2218

Amount of Each Receipt this Period
 5000.00

Transfer Memo
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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: (check only one)	PAGE 11 OF 17
<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. Honeywell International PAC

Mailing Address 101 Constitution Ave, NW, Ste 500

City Washington State DC Zip Code 20001-

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

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
 05 / 30 / 2014
Transaction ID : 40703.C2213

Amount of Each Receipt this Period
 5000.00

Transfer Memo
[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Automotive Free International Trade PAC

Mailing Address 1625 Prince Street, Suite 225

City Alexandria State VA Zip Code 22314-

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

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
 05 / 30 / 2014
Transaction ID : 40703.C2212

Amount of Each Receipt this Period
 5000.00

Transfer Memo
[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. Jeanne O. Mitchell

Mailing Address 2000 K St NW Ste 710

City Washington State DC Zip Code 20006-

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

Name of Employer Occupation
 ExxonMobil Sr Director, Federal Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.34

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : 40703.C2211

Amount of Each Receipt this Period
 333.34

Transfer Memo
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	22098.21

**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. Acqua AI 2

Mailing Address 212 7th St SE

City Washington State DC Zip Code 20003-4311

Purpose of Disbursement
PAC Event Deposit

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2014

Transaction ID : 40703.E1523

Amount of Each Disbursement this Period

2000.00

PAC EVENT DEPOSIT

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265-

Purpose of Disbursement
Credit Card: See Below

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2014

Transaction ID : 40703.E1519

Amount of Each Disbursement this Period

1397.90

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial)

C. St. Regis

Mailing Address 125 Third St

City San Francisco State CA Zip Code 94103-

Purpose of Disbursement
PAC Travel/Lodging

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2014

Transaction ID : 40703.E1520

Amount of Each Disbursement this Period

1397.90

[MEMO ITEM]
MEMO: PAC TRAVEL/LODGING

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

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

3397.90

**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 20007-5124

Purpose of Disbursement
PAC Legal/Admin Fees-Phone/Fax/Cour

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 17 / 2014

Transaction ID : 40703.E1521

Amount of Each Disbursement this Period

84.21

PAC LEGAL/ADMIN FEES-PHONE/FAX/COUR

Full Name (Last, First, Middle Initial)

B. Koch & Hoos LLC

Mailing Address 901 N Washington St Ste 700

City Alexandria State VA Zip Code 22314-1535

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

MM / DD / YYYY
06 / 23 / 2014

Transaction ID : 40703.E1522

Amount of Each Disbursement this Period

1381.25

PAC ACCOUNTING CONSULTING

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

MM / DD / YYYY

Amount of Each Disbursement this Period

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

1465.46

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

4863.36

**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. Ben Sasse For U.S. Senate, Inc.

Mailing Address 105 East 6th St

City State Zip Code
Fremont NE 68025-

Purpose of Disbursement
CONTRIBUTION

Candidate Name
BENJAMIN E SASSE

Office Sought: House
 Senate
 President
State: NE District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 40703.E1509

Amount of Each Disbursement this Period

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Citizens For Cochran

Mailing Address P.O. Box 7183

City State Zip Code
Tupelo MS 38802-

Purpose of Disbursement
CONTRIBUTION

Candidate Name
THAD COCHRAN

Office Sought: House
 Senate
 President
State: MS District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Runoff 2014

Date of Disbursement

/ /

Transaction ID : 40703.E1517

Amount of Each Disbursement this Period

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Cory Gardner For Senate

Mailing Address 9227 E. Lincoln Ave, #200-234

City State Zip Code
Littleton CO 80124-

Purpose of Disbursement
CONTRIBUTION

Candidate Name
CORY GARDNER

Office Sought: House
 Senate
 President
State: CO District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 40703.E1513

Amount of Each Disbursement this Period

CONTRIBUTION

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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. Dr. Monica Wehby For U.S. Senate

Mailing Address P.O. Box 3375

City Portland State OR Zip Code 97208-

Purpose of Disbursement
CONTRIBUTION

Candidate Name
MONICA WEHBY

Office Sought: House
 Senate
 President
State: OR District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 40703.E1511

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Families For James Lankford

Mailing Address PO Box 1639

City Bethany State OK Zip Code 73008-

Purpose of Disbursement
CONTRIBUTION

Candidate Name
JAMES PAUL LANKFORD

Office Sought: House
 Senate
 President
State: OK District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 40703.E1512

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Joni Ernst For U.S. Senate, Inc.

Mailing Address PO Box 93441

City Des Moines State IA Zip Code 50393-

Purpose of Disbursement
CONTRIBUTION

Candidate Name
JONI K ERNST

Office Sought: House
 Senate
 President
State: IA District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		05		2014

Transaction ID : 40703.E1518

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION

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

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

15000.00

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**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. New Hampshire For Scott Brown

Mailing Address PO Box 600

City Rye State NH Zip Code 03870-

Purpose of Disbursement
CONTRIBUTION

Candidate Name
SCOTT P BROWN

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NH District: 00

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2014

Transaction ID : 40703.E1514

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Steve Daines For Montana

Mailing Address PO Box 1598

City Helena State MT Zip Code 59624-

Purpose of Disbursement
CONTRIBUTION

Candidate Name
STEVEN DAINES

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: MT District: 00

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2014

Transaction ID : 40703.E1508

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Terri Lynn Land For Senate

Mailing Address PO Box 308

City Grandville State MI Zip Code 49418-

Purpose of Disbursement
CONTRIBUTION

Candidate Name
TERRI LYNN LAND

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: MI District: 00

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2014

Transaction ID : 40703.E1515

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION

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. Thom Tillis Committee

Mailing Address PO Box 97396

City Raleigh State NC Zip Code 27624-

Purpose of Disbursement
CONTRIBUTION - DEBT RETIREMENT

Candidate Name
THOM R TILLIS

Office Sought: House
 Senate
 President
State: NC District: 00

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Primary Debt Ret

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	04	/	2014

Transaction ID : 40703.E1510

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION - DEBT RETIREMENT

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

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

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

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

5000.00

50000.00
