

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

VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

ADDRESS (number and street) P.O. BOX 70

Check if different than previously reported. (ACC)

MONTPELIER VT 05601

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

C C00035618

3. IS THIS REPORT NEW (N) OR AMENDED (A) 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 [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day **POST**-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 09 / 01 / 2015 through [MM] / [DD] / [YYYY] 09 / 30 / 2015

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 DEBRA RICKER

Signature of Treasurer DEBRA RICKER [Electronically Filed] Date 11 / 03 / 2015

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

Office Use Only									FEC FORM 3X
									Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

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="2015"/>	<input type="text" value="47552.50"/>	<input type="text" value="47552.50"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="17110.17"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="12895.00"/>	<input type="text" value="110479.95"/>
(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="30005.17"/>	<input type="text" value="158032.45"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="14255.62"/>	<input type="text" value="142282.90"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="15749.55"/>	<input type="text" value="15749.55"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

Report Covering the Period: From: / / To: / /

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).....	4950.00	49600.00
(ii) Unitemized	2345.00	34053.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7295.00	83653.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	7295.00	83653.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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	26.95
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).....	5600.00	26800.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	5600.00	26800.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	12895.00	110479.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7295.00	83679.95

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	2175.64	20184.89
(ii) Non-Federal Share.....	3867.77	35884.00
(b) Other Federal Operating Expenditures	8212.21	86214.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	14255.62	142282.90
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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)) ..	14255.62	142282.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10387.85	106398.90

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)	7295.00	83653.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7295.00	83653.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10387.85	106398.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	26.95
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10387.85	106371.95

**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 19
	<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"/> 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)
VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

A. JOHN H ABRY
Full Name (Last, First, Middle Initial)

Mailing Address 310 THAYER BAY RD

City COLCHESTER State VT Zip Code 05446

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

Name of Employer REED ENTERPRISES LLC Occupation PROPERTY MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2015
Transaction ID : SA11AI.17346

Amount of Each Receipt this Period
 1000.00

B. CLARK BENSEN
Full Name (Last, First, Middle Initial)

Mailing Address 3112 CAVE COURT

City WOODBRIDGE State VA Zip Code 22192

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

Name of Employer POLIDATA Occupation PRINCIPLE CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2015
Transaction ID : SA11AI.17356

Amount of Each Receipt this Period
 1000.00

C. JOYCE ERRECART
Full Name (Last, First, Middle Initial)

Mailing Address 2854 HARBOR RD

City SHELBURNE State VT Zip Code 05482

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : SA11AI.17383

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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 7 OF 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

A. BERTRAM FINN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4323 VT. ROUTE 108 SOUTH TE #8
 City State Zip Code
 JEFFERSONVILLE VT 05464
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 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
 09 / 29 / 2015
Transaction ID : SA11AI.17378
 Amount of Each Receipt this Period
 150.00

B. SYLVIA J HUNTER EATON
 Full Name (Last, First, Middle Initial)
 Mailing Address 134 QUAILS HILL RD
 City State Zip Code
 BRATTLEBORO VT 05301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2015
Transaction ID : SA11AI.17360
 Amount of Each Receipt this Period
 1000.00

C. DANIEL W JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3172 HARBOR RD.
 City State Zip Code
 SHELBURNE VT 05482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 02 / 2015
Transaction ID : SA11AI.17341
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	1650.00
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 8 OF 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

Full Name (Last, First, Middle Initial)
A. WILLIAM R. REGISTER

Mailing Address 4008 SULGRAVE DRIVE

City State Zip Code
 ALEXANDRIA VA 22309

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

Name of Employer Occupation
 RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2015
Transaction ID : SA11AI.17352

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. BRIAN SAVAGE

Mailing Address 17 LINDA AVE

City State Zip Code
 SWANTON VT 05488

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

Name of Employer Occupation
 NORTH VALLEY BUSINESS CONSULTING, L.L.C. CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2015
Transaction ID : SA11AI.17379

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
C. EARL WERTHELM

Mailing Address 604 NORTH HARBOR RD

City State Zip Code
 COLCHESTER VT 05446

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

Name of Employer Occupation
 EVERGREEN DEVELOPMENT 2, INC., PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2015
Transaction ID : SA11AI.17374

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

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 9 OF 19
(check only one)

<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)
VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

A. RICHARD J. WOBBY
Full Name (Last, First, Middle Initial)

Mailing Address 268 HIGHLAND AVE

City NORTHFIELD State VT Zip Code 05663

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

Name of Employer ASSOCIATED GENERAL CONTRACTORS OF Occupation TRAINING DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2015

Transaction ID : SA11AI.17348

Amount of Each Receipt this Period
 100.00

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 Y Y

Amount of Each Receipt this Period

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 Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	4950.00

**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 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)
VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

Full Name (Last, First, Middle Initial)

A. DIRECT MAIL SYSTEMS, INC.

Mailing Address 12450 AUTOMOBILE BLVD

City CLEARWATER State FL Zip Code 33762

Purpose of Disbursement
DIRECT MAIL: PRINTING & POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2015

Transaction ID : SB21B.17323

Amount of Each Disbursement this Period

260.00

Category/Type

Full Name (Last, First, Middle Initial)

B. BEN GARROW

Mailing Address 916 WILLIAM RD

City COLCHESTER State VT Zip Code 05601

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2015

Transaction ID : SB21B.17319

Amount of Each Disbursement this Period

956.20

Category/Type

Full Name (Last, First, Middle Initial)

C. BEN GARROW

Mailing Address 916 WILLIAM RD

City COLCHESTER State VT Zip Code 05601

Purpose of Disbursement
TRAVEL: MILEAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2015

Transaction ID : SB21B.17320

Amount of Each Disbursement this Period

150.00

Category/Type

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

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

1366.20

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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 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)
VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

Full Name (Last, First, Middle Initial)

A. BEN GARROW

Mailing Address 916 WILLIAM RD

City COLCHESTER State VT Zip Code 05601

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.17321

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. HALVORSONS INC

Mailing Address 15 CHURCH STREET

City BURLINGTON State VT Zip Code 05401

Purpose of Disbursement
FACILITY RENTAL/CATERING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.17325

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. SUSAN P. HUDSON

Mailing Address 1695 NORTH STREET

City MONTPELIER State VT Zip Code 05602

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.17334

Amount of Each Disbursement this Period

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 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)
VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

Full Name (Last, First, Middle Initial)

A. INTERNAL REVENUE SERVICE

Mailing Address INTERNAL REVENUE SERVICE

City KANSAS CITY State MO Zip Code 64999-0002

Purpose of Disbursement
TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2015

Transaction ID : SB21B.17326

Amount of Each Disbursement this Period

377.95

Full Name (Last, First, Middle Initial)

B. INTERNAL REVENUE SERVICE

Mailing Address INTERNAL REVENUE SERVICE

City KANSAS CITY State MO Zip Code 64999-0002

Purpose of Disbursement
TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2015

Transaction ID : SB21B.17327

Amount of Each Disbursement this Period

57.88

Full Name (Last, First, Middle Initial)

C. INTERNAL REVENUE SERVICE

Mailing Address INTERNAL REVENUE SERVICE

City KANSAS CITY State MO Zip Code 64999-0002

Purpose of Disbursement
TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2015

Transaction ID : SB21B.17328

Amount of Each Disbursement this Period

281.60

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

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

717.43

**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)
VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

Full Name (Last, First, Middle Initial)

A. LEAHY PRESS, INC.

Mailing Address PO BOX 254
79 RIVER ST

City MONTPELIER State VT Zip Code 05602

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2015

Transaction ID : SB21B.17329

Amount of Each Disbursement this Period

148.40

Full Name (Last, First, Middle Initial)

B. LEAHY PRESS, INC.

Mailing Address PO BOX 254
79 RIVER ST

City MONTPELIER State VT Zip Code 05602

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2015

Transaction ID : SB21B.17330

Amount of Each Disbursement this Period

169.60

Full Name (Last, First, Middle Initial)

C. LEAHY PRESS, INC.

Mailing Address PO BOX 254
79 RIVER ST

City MONTPELIER State VT Zip Code 05602

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2015

Transaction ID : SB21B.17331

Amount of Each Disbursement this Period

451.56

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

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

769.56

**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)
VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

Full Name (Last, First, Middle Initial)

A. RIGHT VOTER, LLC

Mailing Address 7915 S EMERSON AVE

City INDIANAPOLIS State IN Zip Code 46237

Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2015

Transaction ID : SB21B.17332

Amount of Each Disbursement this Period

1600.00

Full Name (Last, First, Middle Initial)

B. STAPLES CREDIT PLAN

Mailing Address PO BOX 689020

City DES MOINES State IA Zip Code 50368

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2015

Transaction ID : SB21B.17333

Amount of Each Disbursement this Period

380.85

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 87 STATE STREET

City MONTPELIER State VT Zip Code 05601

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2015

Transaction ID : SB21B.17335

Amount of Each Disbursement this Period

294.00

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

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

2274.85

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)
VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

Full Name (Last, First, Middle Initial)

A. VERMONT DEPARTMENT OF TAXES

Mailing Address P.O. BOX 547

City MONTPELIER State VT Zip Code 05601-0547

Purpose of Disbursement
TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2015

Transaction ID : SB21B.17337

Amount of Each Disbursement this Period

288.00

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

MM / DD / YYYY

Amount of Each Disbursement this Period

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)..... ▶

288.00

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

7880.56

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE	MM / DD / YYYY 09 / 15 / 2015	5600.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	5600.00
Transaction ID : H3.17390	
ii) Generic Voter Drive	
iii) Exempt Activities	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC)	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	5600.00
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred).....	5600.00

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.17307 MARLIN LEASING INC		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 13604		Allocated Activity or Event Year-To-Date _____ 50264.84	
City PHILADELPHIA State PA Zip Code 19101	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2015"/>	
Purpose of Disbursement: EQUIPMENT LEASE: COPIER Activity or Event Identifier: Administrative		_____	
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
_____ 86.17		_____ 153.19	_____ 239.36

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.17305 JEFFREY D. BARTLEY		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. BOX 70		Allocated Activity or Event Year-To-Date _____ 51884.19	
City MONTPELIER State VT Zip Code 05601	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>	
Purpose of Disbursement: PAYROLL Activity or Event Identifier: Administrative		_____	
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
_____ 582.97		_____ 1036.38	_____ 1619.35

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.17308 LEE ROSE LEE VENTURES, LLC		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 115 INDUSTRIAL LANE		Allocated Activity or Event Year-To-Date _____ 52634.19	
City BARRE State VT Zip Code 05641	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>	
Purpose of Disbursement: RENT Activity or Event Identifier: Administrative		_____	
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
_____ 270.00		_____ 480.00	_____ 750.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 939.14		_____ 1669.57		_____ 2608.71

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.17309 INTERNAL REVENUE SERVICE		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address INTERNAL REVENUE SERVICE		Allocated Activity or Event Year-To-Date _____ 53200.49	
City KANSAS CITY State MO Zip Code 64999-0002	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>	
Purpose of Disbursement: TAXES Activity or Event Identifier: Administrative		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 203.87 _____ 362.43 _____ 566.30	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.17311 COMCAST		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2 MAIN ST.		Allocated Activity or Event Year-To-Date _____ 53433.24	
City MONTPELIER State VT Zip Code 05601	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2015"/>	
Purpose of Disbursement: BROADBAND SERVICES Activity or Event Identifier: Administrative		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 83.79 _____ 148.96 _____ 232.75	

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.17306 JEFFREY D. BARTLEY		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. BOX 70		Allocated Activity or Event Year-To-Date _____ 55052.59	
City MONTPELIER State VT Zip Code 05601	Category/ Type	Date <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>	
Purpose of Disbursement: PAYROLL Activity or Event Identifier: Administrative		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT _____ 582.97 _____ 1036.38 _____ 1619.35	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 870.63		_____ 1547.77		_____ 2418.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

VERMONT REPUBLICAN FEDERAL ELECTIONS COMMITTEE

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.17310**
INTERNAL REVENUE SERVICE
Mailing Address INTERNAL REVENUE SERVICE
City KANSAS CITY State MO Zip Code 64999-0002
Purpose of Disbursement: TAXES
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 55618.89
Date: 09 / 30 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
203.87		362.43		566.30

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.17312**
VERMONT DEPARTMENT OF TAXES
Mailing Address P.O. BOX 547
City MONTPELIER State VT Zip Code 05601-0547
Purpose of Disbursement: TAXES
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date: 56068.89
Date: 09 / 30 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
162.00		288.00		450.00

C. Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
Purpose of Disbursement:
Activity or Event Identifier:
Allocated Activity or Event: Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date:
Date:

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
365.87		650.43		1016.30

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
2175.64		3867.77		6043.41