

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Republican Majority Fund

ADDRESS (number and street)

901 N Washington St, Ste 700

Check if different than previously reported. (ACC)

Alexandria

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00296640

3. IS THIS REPORT

NEW (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)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

in the State of

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y Y Y  
01 / 01 / 2018

through

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Koch, Theodore, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Koch, Theodore, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
04 / 13 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="2018"/>		423922.95
(b) Cash on Hand at Beginning of Reporting Period.....	423922.95	
(c) Total Receipts (from Line 19) .....	145635.81	145635.81
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	569558.76	569558.76
7. Total Disbursements (from Line 31).....	181195.72	181195.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	388363.04	388363.04
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Republican Majority Fund**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2018 To: M M / D D / Y Y Y Y 03 / 31 / 2018

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).....	36000.00	36000.00
(ii) Unitemized .....	23110.25	23110.25
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	59110.25	59110.25
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	7000.00	7000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	66110.25	66110.25
12. Transfers From Affiliated/Other Party Committees.....	74458.80	74458.80
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).....	66.76	66.76
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	145635.81	145635.81
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	145635.81	145635.81

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	136195.72	136195.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	136195.72	136195.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	45000.00	45000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	181195.72	181195.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	181195.72	181195.72

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	66110.25	66110.25
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	66110.25	66110.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	136195.72	136195.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	66.76	66.76
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	136128.96	136128.96

**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 39
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A. BRODSKY, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 535 MADISON AVE.  
 City NEW YORK State NY Zip Code 10022-4214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AURELIUS CAPITAL MANAGEMENT, LP Occupation (for Individual) INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 27 / 2018  
**Transaction ID : SA11A.115529**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION

**B. DAVISON, JAMES, E., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 607  
 City RUSTON State LA Zip Code 71273-0607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DAVISON TRANSPORT Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 13 / 2018  
**Transaction ID : SA11A.115714**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION

**C. MELLOTT, HERMAN, B., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 MELLOTT DRIVE  
 City WARFORDSBURG State PA Zip Code 17267-8555  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MELLOTT, CO. Occupation (for Individual) VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 02 / 23 / 2018  
**Transaction ID : SA11A.115991**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 39
	<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	

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

**A. DILLARD, JOHNNY, L., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 1011

City LOWELL	State AR	Zip Code 72745-
----------------	-------------	--------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) BUSINESS OWNER
--	---

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
02		26		2018

**Transaction ID : SA11A.116122**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**B. GARRIOTT, DAVID, , DR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19411 ADKINS FOREST DR.

City SPRING	State TX	Zip Code 77379-3026
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		26		2018

**Transaction ID : SA11A.116293**

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION

**C. HALL, JOHN, C., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2950 CEDARWOOD LANE

City DUNKIRK	State MD	Zip Code 20754-9422
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BES
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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
02		26		2018

**Transaction ID : SA11A.116264**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1050.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 39
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Istock, V., G., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9659 MUSHIE COURT

City NAPLES	State FL	Zip Code 34108-1997
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) 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
02	/	26	/	2018

**Transaction ID : SA11A.116253**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. Keyes, Charles, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2601 N. FILLMORE ST

City LITTLE ROCK	State AR	Zip Code 72207-3616
---------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) 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
02	/	26	/	2018

**Transaction ID : SA11A.116351**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C. Middleton, Dale, B., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 47810 PINECREST DRIVE

City SHELBY TOWNSHIP	State MI	Zip Code 48317-2855
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2018

**Transaction ID : SA11A.116244**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 39
	<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	

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

**A. WILLOX, KAREN, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 198 OCEAN KEY WAY

City JUPITER	State FL	Zip Code 33477-7358
-----------------	-------------	------------------------

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

Name of Employer (for Individual) COMPASS POINT GROUP	Occupation (for Individual) TRAVEL ADVISOR
--	---

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
02		26		2018

**Transaction ID : SA11A.116132**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. WILLOX, NORMAN, A., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 198 OCEAN KEY WAY

City JUPITER	State FL	Zip Code 33477-7358
-----------------	-------------	------------------------

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

Name of Employer (for Individual) BLUE WATER INTERNATIONAL	Occupation (for Individual) PRINCIPAL
---	--

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
02		26		2018

**Transaction ID : SA11A.116133**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. WOLFE, NORMA, M., MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2800 INDIAN RIVER BLVD. APT. H10

City VERO BEACH	State FL	Zip Code 32960-4238
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
02		27		2018

**Transaction ID : SA11A.116577**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10250.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. RANGOS, JOHN, G., MR., SR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 701 OPSREY POINTE CIRCLE  
 City BOCA RATON State FL Zip Code 33431-5245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) BUSINESSMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2018  
**Transaction ID : SA11A.117298**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item  
 CONTRIBUTION

**B. WRENN, STANLEY, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 188 LAWRENCE ROAD 289  
 City STRAWBERRY State AR Zip Code 72469-8510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2018  
**Transaction ID : SA11A.117284**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C. CARDWELL, JAMES, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8175 ARVILLE ST. #30  
 City LAS VEGAS State NV Zip Code 89139-7111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 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  
 03 / 07 / 2018  
**Transaction ID : SA11A.117412**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3450.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 39
	<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

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

**A. BRUNS, DALE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 225 E. ROBINS ST.  
City CONWAY State AR Zip Code 72032-7161  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) BRUNS DEVELOPMENT Occupation (for Individual) RESTAURANT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 12 / 2018  
**Transaction ID : SA11A.117629**  
Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B. BRZICA, MICHAEL, E., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 7120 KENMARE DR.  
City BLOOMINGTON State MN Zip Code 55438-2834  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) ASSOCIATION OF ACCESIBLE MEDICINES Occupation (for Individual) VICE PRESIDENT, FED. GOV'T. AFF/  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 13 / 2018  
**Transaction ID : SA11A.117671**  
Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. TUGGLE, KATHLEEN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 2095 HIGHWAY A1A #4601  
City INDIAN HARBOUR BEA State FL Zip Code 32937-1803  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 14 / 2018  
**Transaction ID : SA11A.117693**  
Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00  
**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 12 OF 39
	<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)  
**Republican Majority Fund**

**A. BROOKS, BOB, O., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 TALMONT PLACE  
 City LITTLE ROCK State AR Zip Code 72223-9054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CAPITOL COUNSEL LLC Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 19 / 2018  
**Transaction ID : SA11A.117762**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
**CONTRIBUTION**

**B. GRAHAM, HOWARD, H., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14980 KARL AVE  
 City MONTE SERENO State CA Zip Code 95030-2226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 29 / 2018  
**Transaction ID : SA11A.118166**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	36000.00

**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 13 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. GOLDMAN SACHS GROUP, INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 101 CONSTITUTION AVE. NW STE. 1000

City WASHINGTON	State DC	Zip Code 20001-2171
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00350744

Name of Employer (for Individual) Occupation (for Individual)

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
02	/	15	/	2018

**Transaction ID : SA11C.115749**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. GENERAL DYNAMICS CORPORATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 2941 FAIRVIEW PARK DR. SUITE 100

City FALLS CHURCH	State VA	Zip Code 22042-4541
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FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer (for Individual) Occupation (for Individual)

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
03	/	13	/	2018

**Transaction ID : SA11C.117631**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C. NCTAPAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 25 MASSACHUSETTS AVENUE NW SUITE 100

City WASHINGTON	State DC	Zip Code 20001-1434
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FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer (for Individual) Occupation (for Individual)

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
03	/	13	/	2018

**Transaction ID : SA11C.117632**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<b>TOTAL</b> This Period (last page this line number only).....	7000.00

**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 14 OF 39
<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. COTTON VICTORY**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 901 N WASHINGTON ST  
SUITE 700

City ALEXANDRIA State VA Zip Code 22314-5509

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
74458.80

Date of Receipt  
03 / 31 / 2018  
**Transaction ID : SA12.118413**

Amount of Each Receipt this Period  
74458.80

Memo Item  
TRANSFER

**B. BLASS, BECKY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 LONGFELLOW LANE

City LITTLE ROCK State AR Zip Code 72207-3750

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

Name of Employer (for Individual) Occupation (for Individual)  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
02 / 27 / 2018  
**Transaction ID : SA.117413.1.Q118**

Amount of Each Receipt this Period  
400.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. BLASS, GUS, , MR., III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 212 CENTER ST STE 800

City LITTLE ROCK State AR Zip Code 72201-2439

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

Name of Employer (for Individual) Occupation (for Individual)  
SELF-EMPLOYED REAL ESTATE

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
02 / 27 / 2018  
**Transaction ID : SA.117414.1.Q118**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 74458.80

**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 15 OF 39
<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. BUCKLEY, MARJORIE, B., MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11450 TURTLE BEACH ROAD

City NORTH PALM BEACH	State FL	Zip Code 33408-3343
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

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
01	/	12	/	2018

**Transaction ID : SA.115224.1.Q118**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. BUCKLEY, WALTER , W., MR., JR.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11450 TURTLE BEACH ROAD

City NORTH PALM BEACH	State FL	Zip Code 33408-3343
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

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
01	/	12	/	2018

**Transaction ID : SA.115223.1.Q118**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. CROW, ROBERT, NATHANIEL, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3525 ARROWHEAD DR.

City DALLAS	State TX	Zip Code 75204-1605
----------------	-------------	------------------------

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

Name of Employer (for Individual) LOCHE LORD L.L.P.	Occupation (for Individual) LAWYER
--	---------------------------------------

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
02	/	02	/	2018

**Transaction ID : SA.115643.1.Q118**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 39
<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. DONOVAN, JAMES, H., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1235 DELAPLANE GRADE ROAD  
 City UPPERVILLE State VA Zip Code 20184-1733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GOLDMAN SACHS Occupation (for Individual) INVESTMENT BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 09 / 2018**  
**Transaction ID : SA.115691.1.Q118**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**B. FIELER, SEAN, M., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40 HASLET AVENUE  
 City PRINCETON State NJ Zip Code 08540-4914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EQUINOX PARTNERS LP Occupation (for Individual) FINANCIAL ANALYST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 31 / 2017**  
**Transaction ID : SA.115160.1.Q118**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**C. FIORI, VIRGIL, S., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8215 MILE TREE DR  
 City FORT SMITH State AR Zip Code 72903-4365  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KMAC Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 13 / 2018**  
**Transaction ID : SA.115726.1.Q118**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**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 17 OF 39
<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. FORD, GERALD, J.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 CRESCENT CT  
SUITE 1350

City DALLAS State TX Zip Code 75201-6988

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

Name of Employer (for Individual) DIAMOND A. FORD CORP. Occupation (for Individual) CHAIRMAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 06 / 2018  
**Transaction ID : SA.117379.1.Q118**

Amount of Each Receipt this Period: 5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. FRIEDMAN, RICHARD, A., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 944 5TH AVENUE

City NEW YORK State NY Zip Code 10021-2656

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

Name of Employer (for Individual) GOLDMAN SACHS Occupation (for Individual) INVESTMENT BANKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2300.00

Date of Receipt: 01 / 16 / 2018  
**Transaction ID : SA.115242.1.Q118**

Amount of Each Receipt this Period: 2300.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. GRAY, C., BOYDEN, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1534 28TH STREET NW

City WASHINGTON State DC Zip Code 20007-3058

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

Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt: 01 / 12 / 2018  
**Transaction ID : SA.115222.1.Q118**

Amount of Each Receipt this Period: 2700.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**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 18 OF 39
<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. HANSON, ALEX, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 MOORHEAD DRIVE  
 City PENNINGTON State NJ Zip Code 08534-1700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) T.G.S. MANAGEMENT COMPANY LLC Occupation (for Individual) FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 16 / 2018**  
**Transaction ID : SA.117744.1.Q118**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**B. HERRING, JAMES, H., MR., JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 132 E. 72ND STREET APARTMENT 3  
 City NEW YORK State NY Zip Code 10021-4273  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GOLDMAN SACHS Occupation (for Individual) MANAGING DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2300.00

Date of Receipt **03 / 06 / 2018**  
**Transaction ID : SA.117380.1.Q118**  
 Amount of Each Receipt this Period 2300.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**C. LANE, ERIC, S., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 200 WEST STREET  
 City NEW YORK State NY Zip Code 10282-2102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GOLDMAN SACHS Occupation (for Individual) MANAGING DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 06 / 2018**  
**Transaction ID : SA.115683.1.Q118**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 39
<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. LIEBLONG, JO ANN, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 24520

City LITTLE ROCK	State AR	Zip Code 72221-4520
---------------------	-------------	------------------------

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

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2018

**Transaction ID : SA.116538.1.Q118**

Amount of Each Receipt this Period  
4600.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. MARSHALL, JON, A., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 187

City KATY	State TX	Zip Code 77492-0187
--------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

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
02	/	28	/	2018

**Transaction ID : SA.116942.1.Q118**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. MARTIRE, FRANK, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 348 PONTE VEDRA BLVD.

City PONTE VEDRA BEACH	State FL	Zip Code 32082-1812
---------------------------	-------------	------------------------

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

Name of Employer (for Individual) F.I.S.	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2018

**Transaction ID : SA.115786.1.Q118**

Amount of Each Receipt this Period  
4600.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 39
<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. MASSEY, RICHARD, N., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 900 S. SHACKLEFORD RD. STE. 710  
 City LITTLE ROCK State AR Zip Code 72211-3871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WESTROCK CAPITAL PARTNERS Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 4600.00

Date of Receipt 02 / 27 / 2018  
**Transaction ID : SA.116930.1.Q118**  
 Amount of Each Receipt this Period 4600.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**B. NOLAN, CANDICE, E., MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 200 N. JEFFERSON AVE. STE. 308  
 City EL DORADO State AR Zip Code 71730-5853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 5000.00

Date of Receipt 02 / 06 / 2018  
**Transaction ID : SA.115680.1.Q118**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**C. NOLAN, ROBERT, C., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 200 N. JEFFERSON AVE. STE. 308  
 City EL DORADO State AR Zip Code 71730-5853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) OIL & GAS  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 5000.00

Date of Receipt 04 / 19 / 2017  
**Transaction ID : SA.109788.1.Q118**  
 Amount of Each Receipt this Period - 600.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**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 21 OF 39
<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. NOLAN, ROBERT, C., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 N. JEFFERSON AVE. STE. 308

City EL DORADO	State AR	Zip Code 71730-5853
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) OIL & GAS
--	--

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
02	/	06	/	2018

**Transaction ID : SA.115682.1.Q118**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. NOREIKA, KEITH, A., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1127 CREST LANE

City MCLEAN	State VA	Zip Code 22101-1805
----------------	-------------	------------------------

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

Name of Employer (for Individual) SIMPSON THATCHER BARTLETT LLP	Occupation (for Individual) ATTORNEY
--	---

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
12	/	31	/	2017

**Transaction ID : SA.115159.1.Q118**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. NOREIKA, KEITH, A., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1127 CREST LANE

City MCLEAN	State VA	Zip Code 22101-1805
----------------	-------------	------------------------

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

Name of Employer (for Individual) SIMPSON THATCHER BARTLETT LLP	Occupation (for Individual) ATTORNEY
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2018

**Transaction ID : SA.117747.1.Q118**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 39
<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. O'NEILL, TIMOTHY, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 WEST STREET

City NEW YORK	State NY	Zip Code 10282-2102
------------------	-------------	------------------------

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

Name of Employer (for Individual) GOLDMAN SACHS	Occupation (for Individual) FINANCE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2018

**Transaction ID : SA.115681.1.Q118**

Amount of Each Receipt this Period  
2300.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. PFAUTCH, ROY, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 52 PORTLAND PLACE

City SAINT LOUIS	State MO	Zip Code 63108-1242
---------------------	-------------	------------------------

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

Name of Employer (for Individual) CIVIC SERVICE INC.	Occupation (for Individual) CONSULTANT
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2018

**Transaction ID : SA.117381.1.Q118**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. REICHNER, CRISTINA, A., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1127 CREST LANE

City MCLEAN	State VA	Zip Code 22101-1805
----------------	-------------	------------------------

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

Name of Employer (for Individual) GEORGETOWN UNIVERSITY HOSPITAL	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		16		2018

**Transaction ID : SA.117743.1.Q118**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 39
<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. SCHWARTZ, ARTHUR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 620 WEST 42ND STREET  
 City NEW YORK State NY Zip Code 10036-2014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AXIUM ADVISORS Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **01 / 26 / 2018**  
**Transaction ID : SA.115466.1.Q118**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**B. SYKES, GENE, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2121 AVENUE OF THE STARS  
 City LOS ANGELES State CA Zip Code 90067-5010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GOLDMAN SACHS Occupation (for Individual) INVESTMENT BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **02 / 02 / 2018**  
**Transaction ID : SA.115645.1.Q118**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**C. WILLOX, NORMAN, A., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 198 OCEAN KEY WAY  
 City JUPITER State FL Zip Code 33477-7358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUE WATER INTERNATIONAL Occupation (for Individual) PRINCIPAL  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt **12 / 14 / 2017**  
**Transaction ID : SA.115764.1.Q118**  
 Amount of Each Receipt this Period - 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	74458.80

**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 24 OF 39
<input 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 checked="" type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. CITIZENS FOR JOSH MANDEL INC.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9856 ARCHER LANE

City DUBLIN	State OH	Zip Code 43017
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FEC ID number of contributing federal political committee. **C** C00494930

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2018

**Transaction ID : SA16.3311**

Amount of Each Receipt this Period  
5000.00

Memo Item  
**CONTRIBUTION REFUND**

**B.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

**C.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	5000.00



**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)  
**A. O'DONNELL AND ASSOCIATES, LTD.**

Date of Disbursement: MM / DD / YYYY  
01 / 02 / 2018

Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement PAC COMMUNICATIONS/POLITICAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.I2887  
Amount of Each Disbursement this Period: 4000.00

Memo Item

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

Date of Disbursement: MM / DD / YYYY  
01 / 16 / 2018

Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMOS

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.I3286  
Amount of Each Disbursement this Period: 578.00

Memo Item

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

Date of Disbursement: MM / DD / YYYY  
01 / 16 / 2018

Mailing Address 50 MASSACHUSETTS AVE NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement PAC TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

FEC Identification Number: C  
Transaction ID : SB21B.I3411  
Amount of Each Disbursement this Period: 289.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4578.00

**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"/> 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. AMTRAK**

Mailing Address 50 MASSACHUSETTS AVE NW

City  
WASHINGTON

State  
DC

Zip Code  
20001

Purpose of Disbursement  
PAC TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	6		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I3412

Amount of Each Disbursement this Period

[REDACTED] 289.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. FOLEY & LARDNER, LLP**

Mailing Address 3000 K STREET NW  
SUITE 600

City  
WASHINGTON

State  
DC

Zip Code  
20007

Purpose of Disbursement  
PAC LEGAL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2892

Amount of Each Disbursement this Period

[REDACTED] 148.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN SOLUTIONS**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
PAC WEBSITE/EMAIL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	5		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I3260

Amount of Each Disbursement this Period

[REDACTED] 2505.00

Memo Item

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

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

[REDACTED] 2653.00

[REDACTED]

**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"/> 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) <b>A. KOCH &amp; HOOS, LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 25 / 2018
Mailing Address 901 N WASHINGTON ST STE 700		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I3259</b> Amount of Each Disbursement this Period 2172.50
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement PAC ACCOUNTING CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. O'DONNELL AND ASSOCIATES, LTD.</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2018
Mailing Address 829 EMERALD DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I3267</b> Amount of Each Disbursement this Period 4000.00
City ALEXANDRIA	State VA	Zip Code 22308
Purpose of Disbursement PAC COMMUNICATIONS/POLITICAL CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CAMPAIGN SOLUTIONS</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2018
Mailing Address 117 N SAINT ASAPH ST		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I3454</b> Amount of Each Disbursement this Period 868.51
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement PAC ONLINE FUNDRAISING & PROCESSING FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7041.01
<b>TOTAL</b> 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"/> 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) <b>A. OPTIMUS CONSULTING, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2018
Mailing Address 130 NORTH FAYETTE STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I3270</b> Amount of Each Disbursement this Period 9091.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement PAC DATA ANALYTICS CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CAMPAIGN SOLUTIONS</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2018
Mailing Address 117 N SAINT ASAPH ST		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I3277</b> Amount of Each Disbursement this Period 2505.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement PAC WEBSITE/EMAIL SERVICES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CONNELL DONATELLI, INC.</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2018
Mailing Address 117 NORTH SAINT ASAPH STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I3276</b> Amount of Each Disbursement this Period 5000.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement PAC ADVERTISING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	16596.00
<b>TOTAL</b> 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"/> 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**

**A. AMERICAN EXPRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMOS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 12 / 2018

FEC Identification Number: C  
Transaction ID : SB21B.I3287  
Amount of Each Disbursement this Period: 730.96

Memo Item

**B. CHARLIE PALMER STEAK**

Full Name (Last, First, Middle Initial)  
Mailing Address 101 CONSTITUTION AVE NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
PAC FOOD & BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 12 / 2018

FEC Identification Number: C  
Transaction ID : SB21B.I3298  
Amount of Each Disbursement this Period: 598.00

Memo Item

**C. KOCH & HOOS, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 901 N WASHINGTON ST STE 700

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC ACCOUNTING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 15 / 2018

FEC Identification Number: C  
Transaction ID : SB21B.I3281  
Amount of Each Disbursement this Period: 3385.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4115.96

**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"/> 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**

**A. KRISTOL, JOSEPH, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 77 H STREET, NW #491

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement PAC FUNDRAISING/MANAGEMENT CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 02 / 16 / 2018

FEC Identification Number C

Transaction ID : SB21B.I3282

Amount of Each Disbursement this Period 1725.00

Memo Item

**B. FOLEY & LARDNER, LLP**

Full Name (Last, First, Middle Initial)

Mailing Address 3000 K STREET NW SUITE 600

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement PAC LEGAL SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 02 / 16 / 2018

FEC Identification Number C

Transaction ID : SB21B.I3283

Amount of Each Disbursement this Period 370.00

Memo Item

**C. NATIONAL ASSOCIATION OF BROADCASTERS**

Full Name (Last, First, Middle Initial)

Mailing Address 1771 N STREET NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement PAC EVENT TICKETS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 02 / 26 / 2018

FEC Identification Number C

Transaction ID : SB21B.I3302

Amount of Each Disbursement this Period 10150.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 12245.00

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

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

Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement  
PAC COMMUNICATIONS/POLITICAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I3305  
Amount of Each Disbursement this Period  
4000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. OPTIMUS CONSULTING, LLC**

Mailing Address 130 NORTH FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC DATA ANALYTICS CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 01 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I3306  
Amount of Each Disbursement this Period  
9091.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN SOLUTIONS**

Mailing Address 117 N SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC ONLINE FUNDRAISING & PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 02 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I3453  
Amount of Each Disbursement this Period  
98.67

Memo Item

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

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

13189.67

**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"/> 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**

**A. SCULLY, MATTHEW, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 6601 E. LINCOLN DRIVE

City PARADISE VALLEY State AZ Zip Code 85253

Purpose of Disbursement PAC COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 08 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I3316

Amount of Each Disbursement this Period: 10000.00

Memo Item

**B. CAMPAIGN SOLUTIONS**

Full Name (Last, First, Middle Initial)

Mailing Address 117 N SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement PAC WEBSITE/EMAIL SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 08 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I3314

Amount of Each Disbursement this Period: 2505.00

Memo Item

**C. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement PAC CREDIT CARD/MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 08 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I3318

Amount of Each Disbursement this Period: 356.74

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	12861.74
<b>TOTAL</b> 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"/> 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) <b>A. D. MOSS &amp; COMPANY, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 08 / 2018	
Mailing Address 3722 MUNSON ROAD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I3317</b>	
City FALLS CHURCH	State VA	Zip Code 22041	Amount of Each Disbursement this Period [REDACTED] 3000.00
Purpose of Disbursement PAC FUNDRAISING CONSULTING		Category/Type [REDACTED]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. JOHN P. MCCONNELL, INC.</b>		Date of Disbursement MM / DD / YYYY 03 / 08 / 2018	
Mailing Address 1210 R STREET, NW #315		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I3315</b>	
City WASHINGTON	State DC	Zip Code 20009	Amount of Each Disbursement this Period [REDACTED] 10000.00
Purpose of Disbursement PAC COMMUNICATIONS CONSULTING		Category/Type [REDACTED]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2018	
Mailing Address P.O. BOX 1270		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I3328</b>	
City NEWARK	State NJ	Zip Code 07101	Amount of Each Disbursement this Period [REDACTED] 1431.07
Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMOS		Category/Type [REDACTED]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 14431.07
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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) <b>A. GEOFFREY LEWIS LTD</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2018
Mailing Address 1433 H STREET, NW		FEC Identification Number C <b>Transaction ID : SB21B.I3331</b> Amount of Each Disbursement this Period 232.65
City WASHINGTON	State DC	
Purpose of Disbursement PAC EVENT EXPENSE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input checked="" type="checkbox"/>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. UNITED AIRLINES INC</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2018
Mailing Address 600 JEFFERSON ST		FEC Identification Number C <b>Transaction ID : SB21B.I3332</b> Amount of Each Disbursement this Period 1113.30
City HOUSTON	State TX	
Purpose of Disbursement PAC TRAVEL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input checked="" type="checkbox"/>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. KOCH &amp; HOOS, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2018
Mailing Address 901 N WASHINGTON ST STE 700		FEC Identification Number C <b>Transaction ID : SB21B.I3326</b> Amount of Each Disbursement this Period 3392.16
City ALEXANDRIA	State VA	
Purpose of Disbursement PAC ACCOUNTING CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3392.16
<b>TOTAL</b> 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"/> 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**

**A. KRISTOL, JOSEPH, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 77 H STREET, NW #491

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement PAC FUNDRAISING/MANAGEMENT CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 19 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I3363

Amount of Each Disbursement this Period: 1725.00

Memo Item

**B. FOLEY & LARDNER, LLP**

Full Name (Last, First, Middle Initial)

Mailing Address 3000 K STREET NW SUITE 600

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement PAC LEGAL SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 20 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I3401

Amount of Each Disbursement this Period: 397.50

Memo Item

**C. UNISOURCE DIRECT, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 82

City WATERTOWN State WI Zip Code 53094

Purpose of Disbursement PAC DIRECT MAIL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 26 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I3407

Amount of Each Disbursement this Period: 35955.72

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	38078.22
<b>TOTAL</b> 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"/> 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**

**A. RIZZO, LAURA, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1316 ALEXANDRIA AVENUE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement PAC FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 30 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I3448

Amount of Each Disbursement this Period: 2900.00

Memo Item

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

Full Name (Last, First, Middle Initial)

Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement PAC COMMUNICATIONS/POLITICAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 30 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I3447

Amount of Each Disbursement this Period: 4000.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	136081.83

**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"/> 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) <b>A. FRENCH HILL FOR ARKANSAS</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2018
Mailing Address PO BOX 7841		FEC Identification Number C 000551275 <b>Transaction ID : SB23.I3273</b> Amount of Each Disbursement this Period 5000.00
City LITTLE ROCK	State AR	Zip Code 72217
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name <b>HILL, JAMES, FRENCH, ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AR	District: 02	

Full Name (Last, First, Middle Initial) <b>B. FRENCH HILL FOR ARKANSAS</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2018
Mailing Address PO BOX 7841		FEC Identification Number C 000551275 <b>Transaction ID : SB23.I3274</b> Amount of Each Disbursement this Period 5000.00
City LITTLE ROCK	State AR	Zip Code 72217
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name <b>HILL, JAMES, FRENCH, ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AR	District: 02	

Full Name (Last, First, Middle Initial) <b>C. WESTERMAN FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2018
Mailing Address PO BOX 21097		FEC Identification Number C 000548180 <b>Transaction ID : SB23.I3272</b> Amount of Each Disbursement this Period 5000.00
City HOT SPRINGS	State AR	Zip Code 71903
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name <b>WESTERMAN, BRUCE, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AR	District: 04	

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

15000.00

**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"/> 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. WESTERMAN FOR CONGRESS**

Date of Disbursement: MM / DD / YYYY  
02 / 07 / 2018

Mailing Address: PO BOX 21097

City: HOT SPRINGS State: AR Zip Code: 71903

Purpose of Disbursement: CONTRIBUTION

Candidate Name: WESTERMAN, BRUCE, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: AR District: 04

FEC Identification Number: C00548180  
Transaction ID: SB23.I3275  
Amount of Each Disbursement this Period: 5000.00

Memo Item

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

Date of Disbursement: MM / DD / YYYY  
02 / 09 / 2018

Mailing Address: 14 FOREST AVENUE

City: MORRIS PLAINS State: NJ Zip Code: 07650

Purpose of Disbursement: CONTRIBUTION

Candidate Name: WEBBER, JAY, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NJ District: 11

FEC Identification Number: C00669069  
Transaction ID: SB23.I3278  
Amount of Each Disbursement this Period: 5000.00

Memo Item

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

Date of Disbursement: MM / DD / YYYY  
03 / 07 / 2018

Mailing Address: PO BOX 3750

City: BRENTWOOD State: TN Zip Code: 37024

Purpose of Disbursement: CONTRIBUTION

Candidate Name: BLACKBURN, MARSHA, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: TN District: 00

FEC Identification Number: C00376939  
Transaction ID: SB23.I3313  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 15000.00

**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"/> 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) <b>A. MARSHA FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2018
Mailing Address PO BOX 3750		FEC Identification Number C00376939 <b>Transaction ID : SB23.I3323</b>
City BRENTWOOD	State TN	Zip Code 37024
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>BLACKBURN, MARSHA, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Memo Item
State: TN	District: 00	

Full Name (Last, First, Middle Initial) <b>B. JOSH HAWLEY FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 03 / 13 / 2018
Mailing Address 150 LONG ROAD SUITE 50		FEC Identification Number C00652727 <b>Transaction ID : SB23.I3324</b>
City CHESTERFIELD	State MO	Zip Code 63005
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>HAWLEY, JOSHUA, DAVID, ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Memo Item
State: MO	District: 00	

Full Name (Last, First, Middle Initial) <b>C. JOSH HAWLEY FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2018
Mailing Address 150 LONG ROAD SUITE 50		FEC Identification Number C00652727 <b>Transaction ID : SB23.I3443</b>
City CHESTERFIELD	State MO	Zip Code 63005
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>HAWLEY, JOSHUA, DAVID, ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> Senate	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Memo Item
State: MO	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	45000.00