

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

North Dakota Republican Party

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"/>		5394.15
(b) Cash on Hand at Beginning of Reporting Period.....	432396.87	
(c) Total Receipts (from Line 19)	412998.84	2130010.03
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	845395.71	2135404.18
7. Total Disbursements (from Line 31).....	634156.54	1924165.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	211239.17	211239.17
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

North Dakota Republican Party

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	61940.00	342926.27
(ii) Unitemized	13327.50	201017.32
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	75267.50	543943.59
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	25000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	80267.50	568943.59
12. Transfers From Affiliated/Other Party Committees.....	332346.33	1473669.50
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).....	35.01	1232.83
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	350.00	7350.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	78814.11
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	78814.11
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	412998.84	2130010.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	412998.84	2051195.92

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	2605.11	30084.69
(ii) Non-Federal Share.....	9800.05	113175.43
(b) Other Federal Operating Expenditures	30605.24	377008.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	43010.40	520268.66
22. Transfers to Affiliated/Other Party Committees.....	36000.00	36075.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	10000.00
24. Independent Expenditures (use Schedule E)	151986.30	731423.47
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	609.50
(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	609.50
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	403159.84	625788.38
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	403159.84	625788.38
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	634156.54	1924165.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	624356.49	1810989.58

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	80267.50	568943.59
34. Total Contribution Refunds (from Line 28(d))	0.00	609.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	80267.50	568334.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	33210.35	407093.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	35.01	1232.83
38. Net Operating Expenditures (subtract Line 37 from Line 36)	33175.34	405860.40

**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 105
	<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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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)
North Dakota Republican Party

A. ALIN, ROBERT, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3646 JUNIPER CT. S.
 City FARGO State ND Zip Code 58104-7586
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHEELS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2018
Transaction ID : SA11A.48041
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

B. ANDERSON, BERT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 S MAIN
 City CROSBY State ND Zip Code 58730-3341
 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 ▼ 262.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2018
Transaction ID : SA11A.48063
 Amount of Each Receipt this Period
 200.00
 Memo Item
 CONTRIBUTION

C. ANDERSON, RONALD, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10891-33RD ST NW
 City KEENE State ND Zip Code 58847-9443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FARMING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 19 / 2018
Transaction ID : SA11A.47757
 Amount of Each Receipt this Period
 300.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 105
	<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)
North Dakota Republican Party

A. BACKMAN, BEAU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1835 CONTESSA DR.
 City BISMARCK State ND Zip Code 58503-0819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BACKMAN TITLE INC. Occupation (for Individual) EMPLOYEE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1036.50

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.47774
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. BATCHELLER, BARRY , , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1441 44TH ST N
 City FARGO State ND Zip Code 58102-2854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) APPAREO SYSTEMS Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 30 / 2018
Transaction ID : SA11A.48000
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. BERGER, JOSEPH, W., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 8TH ST. NW
 City MANDAN State ND Zip Code 58554-2727
 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 10 / 18 / 2018
Transaction ID : SA11A.47727
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11050.00
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 8 OF 105
	<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)
North Dakota Republican Party

A. BOETTCHER, ALLEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 238

City BOTTINEAU	State ND	Zip Code 58318-0238
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DC MANAGEMENT	Occupation (for Individual) MANAGER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2018

Transaction ID : SA11A.47767

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. BORHO, RAY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9836 97TH ST NE

City LANGDON	State ND	Zip Code 58249-9056
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2018

Transaction ID : SA11A.47780

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. BRINSTER, LESLIE, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12849 49TH ST SW

City BELFIELD	State ND	Zip Code 58622-9216
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2018

Transaction ID : SA11A.47852

Amount of Each Receipt this Period
105.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	705.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

A. BURY, ROBERT, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 772 MUNICH DR.
 City BISMARCK State ND Zip Code 58504-7026
 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 ▼ 440.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.48078
 Amount of Each Receipt this Period 120.00
 Memo Item CONTRIBUTION

B. BYE, DANITA, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1059
 City STANLEY State ND Zip Code 58784-1059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SGS, INC. Occupation (for Individual) BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9936.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.48074
 Amount of Each Receipt this Period 9900.00
 Memo Item CONTRIBUTION

C. BYE, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1059
 City STANLEY State ND Zip Code 58784-1059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SGS, INC. Occupation (for Individual) BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 9936.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11A.48073
 Amount of Each Receipt this Period 9900.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 19920.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 105
	<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)
North Dakota Republican Party

A. CEYNAR, VIRGINIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3461 131ST AVE NW
 City ARNEGARD State ND Zip Code 58835-9116
 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 ▼ 350.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.47826
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

B. CHALLEY, ROBERT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2960 CAMINO DIABLO STE 300
 City WALNUT CREEK State CA Zip Code 94597-3961
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **SELF-EMPLOYED** Occupation (for Individual) **REAL ESTATE**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.47794
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. CROOKS, LYNN, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 28TH AVE N
 City FARGO State ND Zip Code 58102-1623
 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 ▼ 430.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.48022
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 105
	<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)
North Dakota Republican Party

A. DEVER, ADAM, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1848 CONTESSA DR.

City BISMARCK	State ND	Zip Code 58503-0818
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MANN ENERGY	Occupation (for Individual) EXECUTIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.50

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11A.48083

Amount of Each Receipt this Period

100.00

Memo Item
CONTRIBUTION

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

Mailing Address PO BOX 155

City ELLENDALE	State ND	Zip Code 58436-0155
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHAD'S ELECTRIC	Occupation (for Individual) SECRETARY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11A.48079

Amount of Each Receipt this Period

100.00

Memo Item
CONTRIBUTION

C. EVANS , FRED, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4949 TRIPLE T RD

City STANLEY	State ND	Zip Code 58784-9557
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
9900.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2018

Transaction ID : SA11A.48067

Amount of Each Receipt this Period

9400.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9600.00
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 105
	<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)
North Dakota Republican Party

A. FISHER, JON, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1828 15TH ST SW
 City MINOT State ND Zip Code 58701-6159
 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 10 / 22 / 2018
Transaction ID : SA11A.47816
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

B. FORTNEY, LISA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4208 OVERLAND RD
 City BISMARCK State ND Zip Code 58503-8839
 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 BE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11A.47911
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. GRANDINETTI, JOHN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 366 SHORE RD
 City STATEN ISLAND State NY Zip Code 10307-1551
 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 ▼ 350.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.47985
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 13 OF 105
	<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)
North Dakota Republican Party

A. HAHN, DARLEAN, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5259 101ST RD NW
 City TIOGA State ND Zip Code 58852-9301
 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 ▼ 350.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11A.48033
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. HANSON, CARMA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2508 OLSON DR.
 City GRAND FORKS State ND Zip Code 58201-7555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ALTRU HEALTH SYSTEM Occupation (for Individual) NURSE MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 11 / 08 / 2018
Transaction ID : SA11A.48108
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. HOVET, MARCIA, L., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1442 125TH AVE NW
 City WATFORD CITY State ND Zip Code 58854-9232
 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 ▼ 400.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.47827
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 325.00
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 14 OF 105
	<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)
North Dakota Republican Party

A. JACOBSON, A. LOWELL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 444 E CALGARY AVE
 City BISMARCK State ND Zip Code 58503-0522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIDWEST BUSINESS SYSTEMS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.47777
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION

B. JOHNSEN, CONNIE, C., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 96 COUNTRY CLUB DR.
 City BISMARCK State ND Zip Code 58501-9374
 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 ▼ 285.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.47982
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

C. KANNIANEN, JORDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8011 51ST ST NW
 City STANLEY State ND Zip Code 58784-9562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENGINEERED ELECTRIC, LLC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11A.48059
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275.00
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 15 OF 105
	<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)
North Dakota Republican Party

A. KANNIANEN, JORDAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8011 51ST ST NW
 City STANLEY State ND Zip Code 58784-9562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ENGINEERED ELECTRIC, LLC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.48082
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. KEAVENY, CHRISTIANE, A., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 309 LUNAR LN
 City BISMARCK State ND Zip Code 58503-0469
 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 ▼ 300.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.47838
 Amount of Each Receipt this Period 150.00
 Memo Item CONTRIBUTION

C. KEMP, JAMES, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9429 155TH AVE NE
 City HAMILTON State ND Zip Code 58238-9724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FARMING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 226.50

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.47817
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 16 OF 105
	<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)
North Dakota Republican Party

A. KNUDSEN, H. DAVID, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3207 46TH AVE SE

City MANDAN	State ND	Zip Code 58554-4729
----------------	-------------	------------------------

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 ▼
8000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		20		2018

Transaction ID : SA11A.48133

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. KREUN, CURTISS, E., SENATOR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3111 LONGBOW CT

City GRAND FORKS	State ND	Zip Code 58203-2193
---------------------	-------------	------------------------

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

Name of Employer (for Individual) STATE OF ND	Occupation (for Individual) STATE REPRESENTATIVE
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2018

Transaction ID : SA11A.48090

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

C. KUEHN, WILTON, H., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 531 HIGHRIDGE DR.

City BISMARCK	State ND	Zip Code 58503-6239
------------------	-------------	------------------------

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	/	D D	/	Y Y Y Y
10		18		2018

Transaction ID : SA11A.47728

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2650.00
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 105
	<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)
North Dakota Republican Party

A. LEMER, BLAINE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 5TH AVE NORTH W
 City HAZEN State ND Zip Code 58545-4110
 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 ▼ 205.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.47699
 Amount of Each Receipt this Period 30.00
 Memo Item CONTRIBUTION

B. LINDBERG, ROBERT, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1849 MONTEGO DR.
 City BISMARCK State ND Zip Code 58503-0858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LAVENTURE, LLC Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 551.50

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11A.48045
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. LINDQUIST, CHARLES, Q., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 1 1/2 ST NW
 City HETTINGER State ND Zip Code 58639-8562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AIR DAKOTA FLITE INC. Occupation (for Individual) EMPLOYEE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.47961
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	580.00
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 105
	<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)
North Dakota Republican Party

A. MAGNUSSON, KEITH, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 550 BRANDON PL
 UNIT 306
 City BISMARCK State ND Zip Code 58503-5563
 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 ▼ 600.00

Date of Receipt 10 / 28 / 2018
Transaction ID : SA11A.47979
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. MARX, RICHARD, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 440
 City WAPPINGERS FALLS State NY Zip Code 12590-0440
 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 ▼ 525.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.47933
 Amount of Each Receipt this Period 105.00
 Memo Item CONTRIBUTION

C. MILLER, DWIGHT, S., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11360 EDGEWOOD DR.
 City BISMARCK State ND Zip Code 58503-9211
 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 ▼ 375.00

Date of Receipt 10 / 25 / 2018
Transaction ID : SA11A.47940
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 455.00
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 19 OF 105
	<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)
North Dakota Republican Party

A. MURPHY, THOMAS, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10929 3RD ST NW
 City LILLDEER State ND Zip Code 58640-9121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) RANCHING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.47858
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. NEUMANN, JANET, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 664
 City CANDO State ND Zip Code 58324-0664
 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 ▼ 201.50

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.47956
 Amount of Each Receipt this Period 65.00
 Memo Item CONTRIBUTION

C. NORHEIM, EUGENE, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6869 97TH ST NE
 City ROCKLAKE State ND Zip Code 58365-9623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FARMING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.47787
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	265.00
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 20 OF 105
	<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)
North Dakota Republican Party

A. PETERSON, HARVEY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 904

City BEACH	State ND	Zip Code 58621-0904
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 286.50

Date of Receipt
MM / DD / YYYY
10 / 19 / 2018
Transaction ID : SA11A.47755

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. PETERSON, MYRENE, A., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5140 136TH AVE SE

City ENDERLIN	State ND	Zip Code 58027-9561
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) ENDERLIN MUNICIPAL LIBRARY		Occupation (for Individual) LIBRARIAN
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2018
Transaction ID : SA11A.48089

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. PETERSON, RICHARD, G., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3419 PETERSON PKWY N

City FARGO	State ND	Zip Code 58102-1239
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2018
Transaction ID : SA11A.47862

Amount of Each Receipt this Period
25.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	225.00
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 105
	<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)
North Dakota Republican Party

A. SCHEEL, ROBERT, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1200 HARWOOD DR. S.

City FARGO	State ND	Zip Code 58104-6298
---------------	-------------	------------------------

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
10		18		2018

Transaction ID : SA11A.47694

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. SCOTT, JOHN, W., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 MAIN AVE.

City GILBY	State ND	Zip Code 58235-
---------------	-------------	--------------------

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

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

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
10		29		2018

Transaction ID : SA11A.47993

Amount of Each Receipt this Period
150.00

Memo Item CONTRIBUTION

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

Mailing Address 10971 60TH ST NW

City TIOGA	State ND	Zip Code 58852-9292
---------------	-------------	------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) FARMING/RANCHING
--	---

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
11		02		2018

Transaction ID : SA11A.48047

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	350.00
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 22 OF 105
	<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)
North Dakota Republican Party

A. SKARPHOL, CARL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 10TH ST W
 City BOTTINEAU State ND Zip Code 58318-1633
 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 ▼ 333.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11A.47729
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

B. STAHL, FLORENCE, E., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1741 105TH AVE NE
 City BINFORD State ND Zip Code 58416-9473
 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 ▼ 221.50

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11A.47949
 Amount of Each Receipt this Period 35.00
 Memo Item CONTRIBUTION

C. STUBER, ROGER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 56
 City BOWMAN State ND Zip Code 58623-0056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FARMING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 19 / 2018
Transaction ID : SA11A.47770
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 195.00
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 23 OF 105
	<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)
North Dakota Republican Party

A. SWENSON, HARLEY, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8301 HWY 1804 S
 City BISMARCK State ND Zip Code 58504-9629
 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 10 / 18 / 2018
Transaction ID : SA11A.47734
 Amount of Each Receipt this Period 125.00
 Memo Item CONTRIBUTION

B. UTTER, RAY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3061 SAND HILL RD.
 City BISMARCK State ND Zip Code 58503-6437
 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 ▼ 511.50

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11A.47983
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. VINING, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 A AVE. SW
 City MINOT State ND Zip Code 58701-4548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TRINITY HOSPITAL Occupation (for Individual) NURSE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.47840
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 OF 105
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

A. VOELLER, BETH, A.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 316 4TH ST. W. APT. 1
 City BOTTINEAU State ND Zip Code 58318-1240
 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 10 / 18 / 2018
Transaction ID : SA11A.47724
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. WARDNER, RICHARD, , SEN.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1042 12TH AVE W
 City DICKINSON State ND Zip Code 58601-3654
 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 ▼ 1640.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11A.48066
 Amount of Each Receipt this Period 520.00
 Memo Item CONTRIBUTION

C. WHALEY, STEVEN, V., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 9434
 City FARGO State ND Zip Code 58106-9434
 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 ▼ 320.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.47843
 Amount of Each Receipt this Period 200.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	820.00
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 25 OF 105
	<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)
North Dakota Republican Party

A. WISDOM, DAVID, L., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3290 42ND ST
 City MANDAN State ND Zip Code 58554-8327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3250.00

Date of Receipt 11 / 20 / 2018
Transaction ID : SA11A.48134
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

B. ZANDER, DAVID, J., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1718 28TH ST W
 City WILLISTON State ND Zip Code 58801-2406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTRO-CHEM LAB, INC. Occupation (for Individual) CHEMICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11A.47809
 Amount of Each Receipt this Period 150.00
 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

SUBTOTAL of Receipts This Page (optional).....	2650.00
TOTAL This Period (last page this line number only).....	61940.00

**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 26 OF 105
<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)
North Dakota Republican Party

A. ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTI

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

Mailing Address 440 FIRST STREET NW,
SUITE 200

City WASHINGTON State DC Zip Code 20001-2376

FEC ID number of contributing federal political committee. **C** C00010421

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	/	D D	/	Y Y Y Y
10		29		2018

Transaction ID : SA11C.47998

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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	/	D D	/	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	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

**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 27 OF 105
<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)
North Dakota Republican Party

A. CRAMER VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 26141

City ALEXANDRIA	State VA	Zip Code 22313-6141
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 93322.65

Date of Receipt
MM / DD / YYYY
10 / 26 / 2018
Transaction ID : SA12.47972

Amount of Each Receipt this Period
11572.52

Memo Item
TRANSFER

INCLUDES PREVIOUSLY ITEMIZED DONORS;
TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. BRANDT, ACE, A., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P.O. BOX 230

City FARGO	State ND	Zip Code 58107-0230
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) BRANDT HOLDINGS		Occupation (for Individual) PRESIDENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
09 / 10 / 2018
Transaction ID : SA12.47973

Amount of Each Receipt this Period
10000.00

Memo Item
TRANSFER

JFC ATTRIB: CRAMER VICTORY FUND

C. NRSC TARGETED STATE VICTORY FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
FEC ID number of contributing federal political committee. C C00679381		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 378352.09

Date of Receipt
MM / DD / YYYY
10 / 30 / 2018
Transaction ID : SA12.48006

Amount of Each Receipt this Period
36228.81

Memo Item
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

SUBTOTAL of Receipts This Page (optional).....	47801.33
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 28 OF 105
<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)
North Dakota Republican Party

A. BUSCH, AUGUST, A., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address ONE MIN RIVERS MALL DR.
 City ST PETERS State MO Zip Code 63376-4320
 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 ▼ 8875.00

Date of Receipt **09 / 18 / 2018**
Transaction ID : SA12.48007
 Amount of Each Receipt this Period 2208.33
 Memo Item
 TRANSFER
 JFC ATTRIB: NRSC TARGETED STATE VICTORY FUND

B. CRAIG, STEVEN, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 OCEANCREST
 City NEWPORT COAST State CA Zip Code 92657-1802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CRAIG REALTY GROUP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1944.44

Date of Receipt **10 / 17 / 2018**
Transaction ID : SA12.48012
 Amount of Each Receipt this Period 1944.44
 Memo Item
 TRANSFER
 JFC ATTRIB: NRSC TARGETED STATE VICTORY FUND

C. HALE, ROBERT, T., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 OLMSTEAD DR.
 City HINGHAM State MA Zip Code 02043-2651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRANITE TELECOMMUNICATIONS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 6944.44

Date of Receipt **10 / 16 / 2018**
Transaction ID : SA12.48010
 Amount of Each Receipt this Period 6944.44
 Memo Item
 TRANSFER
 JFC ATTRIB: NRSC TARGETED STATE VICTORY FUND

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 29 OF 105
<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)
North Dakota Republican Party

A. HANGSLEBEN, SELMA, JO, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 PAINTED CLOUD PL
 City LAS VEGAS State NV Zip Code 89144-1381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RELIANCE TELEPHONE Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3800.00

Date of Receipt **09 / 12 / 2018**
Transaction ID : SA12.48011
 Amount of Each Receipt this Period 127.78
 Memo Item
 TRANSFER
 JFC ATTRIB: NRSC TARGETED STATE VICTORY FUND

B. HUNT, WOODY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 12220
 City EL PASO State TX Zip Code 79913-0220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUNT COMPANIES INC. Occupation (for Individual) EXECUTIVE CHAIRMAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 8000.00

Date of Receipt **10 / 22 / 2018**
Transaction ID : SA12.48013
 Amount of Each Receipt this Period 8000.00
 Memo Item
 TRANSFER
 JFC ATTRIB: NRSC TARGETED STATE VICTORY FUND

C. RABOIS, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 EVERSON ST
 City SAN FRANCISCO State CA Zip Code 94131-2636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KHOSLA VENTURES Occupation (for Individual) GENERAL PARTNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3672.22

Date of Receipt **10 / 16 / 2018**
Transaction ID : SA12.48008
 Amount of Each Receipt this Period 3672.22
 Memo Item
 TRANSFER
 JFC ATTRIB: NRSC TARGETED STATE VICTORY FUND

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 30 OF 105
<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)
North Dakota Republican Party

A. TORRES, MANUEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 MORNING MIST LN
 City WOODSTOCK State GA Zip Code 30188-3777
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PINNACLE CLIMATE TECHNOLOGIES Occupation (for Individual) DIRECTOR NATIONAL ACCTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 61.11

Date of Receipt 10 / 17 / 2018
Transaction ID : SA12.48009
 Amount of Each Receipt this Period 61.11
 Memo Item
 TRANSFER
 JFC ATTRIB: NRSC TARGETED STATE VICTORY FUND

B. 21ST CENTURY MAJORITY FUND
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 20475
 City ATLANTA State GA Zip Code 30325-0475
 FEC ID number of contributing federal political committee. **C** C00361956
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2777.78

Date of Receipt 10 / 18 / 2018
Transaction ID : SA12.48014
 Amount of Each Receipt this Period 2777.78
 Memo Item
 TRANSFER
 JFC ATTRIB: NRSC TARGETED STATE VICTORY FUND

C. AMERICAN STAFFING ASSOCIATION PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 277 S WASHINGTON ST STE 200
 City ALEXANDRIA State VA Zip Code 22314-3675
 FEC ID number of contributing federal political committee. **C** C00145623
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA12.48015
 Amount of Each Receipt this Period 2500.00
 Memo Item
 TRANSFER
 JFC ATTRIB: NRSC TARGETED STATE VICTORY FUND

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 31 OF 105
<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)
North Dakota Republican Party

A. ASSOCIATED GENERAL CONTRACTORS PAC (AGC PAC)

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

Mailing Address 2300 WILSON BLVD
STE 300

City ARLINGTON State VA Zip Code 22201-5426

FEC ID number of contributing federal political committee. **C** C00082917

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1388.89

Date of Receipt
10 / 22 / 2018
Transaction ID : SA12.48016

Amount of Each Receipt this Period
1388.89

Memo Item
TRANSFER

JFC ATTRIB: NRSC TARGETED STATE VICTORY FUND

B. EXXONMOBIL PAC

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

Mailing Address 5959 LAS COLINAS BLVD

City IRVING State TX Zip Code 75039-4202

FEC ID number of contributing federal political committee. **C** C00121368

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1388.89

Date of Receipt
10 / 29 / 2018
Transaction ID : SA12.48017

Amount of Each Receipt this Period
1388.89

Memo Item
TRANSFER

JFC ATTRIB: NRSC TARGETED STATE VICTORY FUND

C. SAVE AMERICA PAC

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

Mailing Address 407 W JEFFERSON ST

City BOISE State ID Zip Code 83702-6049

FEC ID number of contributing federal political committee. **C** C00461723

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1666.66

Date of Receipt
10 / 26 / 2018
Transaction ID : SA12.48018

Amount of Each Receipt this Period
833.33

Memo Item
TRANSFER

JFC ATTRIB: NRSC TARGETED STATE VICTORY FUND

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 32 OF 105
<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)
North Dakota Republican Party

A. TENN PAC INC.

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

Mailing Address 6213 CHARLOTTE AVE
STE 112

City NASHVILLE State TN Zip Code 37209-3038

FEC ID number of contributing federal political committee. **C** C00388421

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 15 / 2018
Transaction ID : SA12.48019

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

JFC ATTRIB: NRSC TARGETED STATE VICTORY FUND

B. TEAM CRAMER ND

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

Mailing Address PO BOX 26141

City ALEXANDRIA State VA Zip Code 22313-6141

FEC ID number of contributing federal political committee. **C** C00686105

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
21846.46

Date of Receipt
10 / 26 / 2018
Transaction ID : SA12.47974

Amount of Each Receipt this Period
10600.00

Memo Item
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

C. BENNETT, RHETT, , ,

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

Mailing Address 3861 BELLAIRE CIR

City FORT WORTH State TX Zip Code 76109-2750

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

Name of Employer (for Individual) Occupation (for Individual)
BLACK MOUNTAIN CEO

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2300.00

Date of Receipt
09 / 17 / 2018
Transaction ID : SA12.47976

Amount of Each Receipt this Period
2300.00

Memo Item
TRANSFER

JFC ATTRIB: TEAM CRAMER ND

SUBTOTAL of Receipts This Page (optional).....	10600.00
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 33 OF 105
<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)
North Dakota Republican Party

A. GJOVIG, BRUCE , Q., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 N 3RD ST #2013

City GRAND FORKS	State ND	Zip Code 58203-3757
---------------------	-------------	------------------------

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 ▼
1036.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2018

Transaction ID : SA12.47975

Amount of Each Receipt this Period
1000.00

Memo Item
TRANSFER

JFC ATTRIB: TEAM CRAMER ND

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

Mailing Address 3221 COLLINSWORTH ST

City FORT WORTH	State TX	Zip Code 76107-5739
--------------------	-------------	------------------------

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 BE
---	---

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
10	/	15	/	2018

Transaction ID : SA12.47977

Amount of Each Receipt this Period
2300.00

Memo Item
TRANSFER

JFC ATTRIB: TEAM CRAMER ND

C. WOOD, DONALD, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3501 FAUDREE RD

City ODESSA	State TX	Zip Code 79765-8634
----------------	-------------	------------------------

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

Name of Employer (for Individual) PERMIAN BASIN INVESTMENTS	Occupation (for Individual) PRESIDENT
--	--

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
09	/	29	/	2018

Transaction ID : SA12.47978

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

JFC ATTRIB: TEAM CRAMER ND

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 34 OF 105
<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)
North Dakota Republican Party

A. NRSC INC

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

Mailing Address 425 2ND ST NE

City WASHINGTON	State DC	Zip Code 20002-4914
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00027466

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
188200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

Transaction ID : SA12.000004

Amount of Each Receipt this Period
4200.00

Memo Item
CONTRIBUTION

B. NRSC INC

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

Mailing Address 425 2ND ST NE

City WASHINGTON	State DC	Zip Code 20002-4914
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00027466

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
188200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2018

Transaction ID : SA12.000005

Amount of Each Receipt this Period
4200.00

Memo Item
CONTRIBUTION

C. REPUBLICAN NATIONAL COMMITTEE

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

Mailing Address 301 1ST ST SE

City WASHINGTON	State DC	Zip Code 20003-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00003418

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
721948.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA12.000000

Amount of Each Receipt this Period
75200.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	83600.00
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 35 OF 105
<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)
North Dakota Republican Party

A. REPUBLICAN NATIONAL COMMITTEE

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

Mailing Address 301 1ST ST SE

City WASHINGTON	State DC	Zip Code 20003-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00003418

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
721948.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

Transaction ID : SA12.000001

Amount of Each Receipt this Period
117000.00

Memo Item
CONTRIBUTION

B. REPUBLICAN NATIONAL COMMITTEE

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

Mailing Address 301 1ST ST SE

City WASHINGTON	State DC	Zip Code 20003-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00003418

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
721948.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA12.000002

Amount of Each Receipt this Period
65845.00

Memo Item
CONTRIBUTION

C. REPUBLICAN NATIONAL COMMITTEE

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

Mailing Address 301 1ST ST SE

City WASHINGTON	State DC	Zip Code 20003-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00003418

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
721948.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2018

Transaction ID : SA12.000003

Amount of Each Receipt this Period
7500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	190345.00
TOTAL This Period (last page this line number only).....	332346.33

**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 36 OF 105
<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 type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

A. DAKOTA PAC

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

Mailing Address P.O. BOX 3206

City BISMARCK	State ND	Zip Code 58502
------------------	-------------	-------------------

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 ▼
6276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2018

Transaction ID : SA17.251

Amount of Each Receipt this Period
116.00

Memo Item
RENT
RENT

B. HOEVEN FOR SENATE

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

Mailing Address P.O. BOX 861

City BISMARCK	State ND	Zip Code 58502
------------------	-------------	-------------------

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 ▼
2574.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2018

Transaction ID : SA17.252

Amount of Each Receipt this Period
234.00

Memo Item
RENT
RENT

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
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	350.00

**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)
North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address PO BOX 84314

City: BATON ROUGE State: LA Zip Code: 70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 18 / 2018

FEC Identification Number

C []

Transaction ID : SB21.10001
Amount of Each Disbursement this Period

[] 10.74

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address PO BOX 84314

City: BATON ROUGE State: LA Zip Code: 70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2018

FEC Identification Number

C []

Transaction ID : SB21.10003
Amount of Each Disbursement this Period

[] 13.58

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address PO BOX 84314

City: BATON ROUGE State: LA Zip Code: 70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
10 / 21 / 2018

FEC Identification Number

C []

Transaction ID : SB21.10008
Amount of Each Disbursement this Period

[] 1.30

Memo Item

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

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

[] 25.62

[]

**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)
North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address PO BOX 84314

City **BATON ROUGE** State **LA** Zip Code **70884**

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21.10012

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address PO BOX 84314

City **BATON ROUGE** State **LA** Zip Code **70884**

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21.10018

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address PO BOX 84314

City **BATON ROUGE** State **LA** Zip Code **70884**

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21.10019

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address PO BOX 84314

City **BATON ROUGE** State **LA** Zip Code **70884**

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21.10021

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address PO BOX 84314

City **BATON ROUGE** State **LA** Zip Code **70884**

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21.10025

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address PO BOX 84314

City **BATON ROUGE** State **LA** Zip Code **70884**

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21.10026

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address PO BOX 84314

City **BATON ROUGE** State **LA** Zip Code **70884**

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2018

FEC Identification Number

C

Transaction ID : SB21.10028

Amount of Each Disbursement this Period

22.45

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address PO BOX 84314

City **BATON ROUGE** State **LA** Zip Code **70884**

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2018

FEC Identification Number

C

Transaction ID : SB21.10030

Amount of Each Disbursement this Period

69.81

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address PO BOX 84314

City **BATON ROUGE** State **LA** Zip Code **70884**

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2018

FEC Identification Number

C

Transaction ID : SB21.10032

Amount of Each Disbursement this Period

19.71

Memo Item

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

111.97

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)
North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address PO BOX 84314

City **BATON ROUGE** State **LA** Zip Code **70884**

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 08 / 2018

FEC Identification Number

C

Transaction ID : SB21.10033

Amount of Each Disbursement this Period

2.70

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address PO BOX 84314

City **BATON ROUGE** State **LA** Zip Code **70884**

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 09 / 2018

FEC Identification Number

C

Transaction ID : SB21.10035

Amount of Each Disbursement this Period

1.92

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address PO BOX 84314

City **BATON ROUGE** State **LA** Zip Code **70884**

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 12 / 2018

FEC Identification Number

C

Transaction ID : SB21.10036

Amount of Each Disbursement this Period

2.60

Memo Item

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

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

7.22

**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)
North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address PO BOX 84314

City **BATON ROUGE** State **LA** Zip Code **70884**

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
11 / 14 / 2018

FEC Identification Number

C

Transaction ID : SB21.10037

Amount of Each Disbursement this Period

0.65

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address PO BOX 84314

City **BATON ROUGE** State **LA** Zip Code **70884**

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
11 / 19 / 2018

FEC Identification Number

C

Transaction ID : SB21.10039

Amount of Each Disbursement this Period

3.35

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address PO BOX 84314

City **BATON ROUGE** State **LA** Zip Code **70884**

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
11 / 20 / 2018

FEC Identification Number

C

Transaction ID : SB21.10040

Amount of Each Disbursement this Period

0.65

Memo Item

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

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

4.65

**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)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. BISMARCK MANDAN SECURITY INC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			26			2018			

Mailing Address PO BOX 744

City BISMARCK State ND Zip Code 58501

FEC Identification Number

C []

Transaction ID : SB21.10042
Amount of Each Disbursement this Period

[] 672.00

Purpose of Disbursement SECURITY SVC

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. CLOCKWORK SYSTEMS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2018			

Mailing Address 6001 GLOSTER RD

City BETHESDA State MD Zip Code 20816

FEC Identification Number

C []

Transaction ID : SB21.10023
Amount of Each Disbursement this Period

[] 450.00

Purpose of Disbursement LIST MANAGEMENT SVC

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. FLASH PRINTING

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2018			

Mailing Address PO BOX 2263

City BISMARCK State ND Zip Code 58502

FEC Identification Number

C []

Transaction ID : SB21.10004
Amount of Each Disbursement this Period

[] 18.11

Purpose of Disbursement PRINTING

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

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

[] 1140.11

[]

**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)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. FLS CONNECT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2018

Mailing Address 7300 HUDSON BLVD
SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
FUNDRAISING PHONE CALLS

FEC Identification Number

C [REDACTED]

Transaction ID : SB21.10014

Amount of Each Disbursement this Period

[REDACTED] 4049.45

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. FORUM COMMUNICATIONS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		19		2018

Mailing Address PO BOX 2020

City FARGO State ND Zip Code 58107

Purpose of Disbursement
PRINTING

FEC Identification Number

C [REDACTED]

Transaction ID : SB21.10005

Amount of Each Disbursement this Period

[REDACTED] 522.17

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. FORUM COMMUNICATIONS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2018

Mailing Address PO BOX 2020

City FARGO State ND Zip Code 58107

Purpose of Disbursement
PRINTING

FEC Identification Number

C [REDACTED]

Transaction ID : SB21.10009

Amount of Each Disbursement this Period

[REDACTED] 2023.35

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

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

[REDACTED] 6594.97

TOTAL 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)
North Dakota Republican Party

Full Name (Last, First, Middle Initial) A. KATAHDIN STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y Y 10 / 24 / 2018	
Mailing Address 5 DICKENS RD			
City LINCOLNVILLE	State ME	Zip Code 04849	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		FEC Identification Number C	
Candidate Name		Transaction ID : SB21.10016 Amount of Each Disbursement this Period 2500.00	
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. LINCOLN STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y Y 10 / 24 / 2018	
Mailing Address 740 S MILL AVE SUITE 200			
City TEMPE	State AZ	Zip Code 58501	
Purpose of Disbursement WEB SERIVE/HOSTING		FEC Identification Number C	
Candidate Name		Transaction ID : SB21.10015 Amount of Each Disbursement this Period 12100.00	
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) C. MIDCONTINENT COMMUNICATIONS		Date of Disbursement M M / D D / Y Y Y Y Y 11 / 07 / 2018	
Mailing Address PO BOX 5010			
City SIOUX FALLS	State SD	Zip Code 57117	
Purpose of Disbursement UTILITIES		FEC Identification Number C	
Candidate Name		Transaction ID : SB21.10044 Amount of Each Disbursement this Period 255.00	
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		

SUBTOTAL of Disbursements This Page (optional)..... ▶	14855.00
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)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. MIDCONTINENT COMMUNICATIONS

Mailing Address PO BOX 5010

City
SIOUX FALLS

State
SD

Zip Code
57117

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			08			2018			

FEC Identification Number

C []
Transaction ID : SB21.10045
 Amount of Each Disbursement this Period
 [] 255.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MIDCONTINENT COMMUNICATIONS

Mailing Address PO BOX 5010

City
SIOUX FALLS

State
SD

Zip Code
57117

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			22			2018			

FEC Identification Number

C []
Transaction ID : SB21.10046
 Amount of Each Disbursement this Period
 [] 575.25

Memo Item

Full Name (Last, First, Middle Initial)

C. SOUTHWEST PUBLISHING

Mailing Address 4000 SE ADAMS ST

City
TOPEKA

State
KS

Zip Code
66609

Purpose of Disbursement
PRINTING/POSTAGE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2018			

FEC Identification Number

C []
Transaction ID : SB21.10024
 Amount of Each Disbursement this Period
 [] 1391.70

Memo Item

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

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

[] 2221.95

[]

**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)
North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. STARION BANK

Mailing Address PO BOX 777

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2018

FEC Identification Number

C
Transaction ID : SB21.10017
Amount of Each Disbursement this Period
40.00

Memo Item

Full Name (Last, First, Middle Initial)

B. STARION BANK

Mailing Address PO BOX 777

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2018

FEC Identification Number

C
Transaction ID : SB21.10020
Amount of Each Disbursement this Period
20.00

Memo Item

Full Name (Last, First, Middle Initial)

C. STARION BANK

Mailing Address PO BOX 777

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2018

FEC Identification Number

C
Transaction ID : SB21.10027
Amount of Each Disbursement this Period
20.00

Memo Item

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

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

80.00

**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)
North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. STARION BANK

Mailing Address PO BOX 777

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 31 / 2018

FEC Identification Number

C

Transaction ID : SB21.10029

Amount of Each Disbursement this Period

49.95

Memo Item

Full Name (Last, First, Middle Initial)

B. STARION BANK

Mailing Address PO BOX 777

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 02 / 2018

FEC Identification Number

C

Transaction ID : SB21.10031

Amount of Each Disbursement this Period

20.00

Memo Item

Full Name (Last, First, Middle Initial)

C. STARION BANK

Mailing Address PO BOX 777

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 20 / 2018

FEC Identification Number

C

Transaction ID : SB21.10041

Amount of Each Disbursement this Period

20.00

Memo Item

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

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

89.95

**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)
North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. STARION BANK

Mailing Address PO BOX 777

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 26 / 2018

FEC Identification Number

C
Transaction ID : SB21.10043
Amount of Each Disbursement this Period
20.00

Memo Item

Full Name (Last, First, Middle Initial)

B. STEVE BROWN DIRECT MARKETING LLC

Mailing Address 3864 WEST MILLERS BRIDGE RD

City TALLAHASSEE State FL Zip Code 32312

Purpose of Disbursement
PRINTING/POSTAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 30 / 2018

FEC Identification Number

C
Transaction ID : SB21.10022
Amount of Each Disbursement this Period
621.24

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 185 BERRY ST
SUITE 550

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 08 / 2018

FEC Identification Number

C
Transaction ID : SB21.10034
Amount of Each Disbursement this Period
2.80

Memo Item

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

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

644.04

**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)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. VISA

Mailing Address PO BOX 4512

City
CAROL STREAM

State
IL

Zip Code
60197

Purpose of Disbursement
CREDIT CARD PAYMENT

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
10			19			2018			

FEC Identification Number

C []

Transaction ID : SB21.10006

Amount of Each Disbursement this Period

[] 412.42

Memo Item

Full Name (Last, First, Middle Initial)

B. JIMMY JOHNS

Mailing Address 1801 45TH ST S

City
FARGO

State
ND

Zip Code
58104

Purpose of Disbursement
FOOD/BEVERAGE

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
10			19			2018			

FEC Identification Number

C []

Transaction ID : SB21.20002

Amount of Each Disbursement this Period

[] 150.50

Memo Item

Full Name (Last, First, Middle Initial)

C. OFFICE MAX

Mailing Address 6600 NORTH MILITARY TRAIL

City
BOCA RATON

State
FL

Zip Code
33496

Purpose of Disbursement
OFFICE SUPPLIES

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
10			19			2018			

FEC Identification Number

C []

Transaction ID : SB21.20000

Amount of Each Disbursement this Period

[] 14.16

Memo Item

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

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

[] 412.42

[]

**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)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. RENTALL

Mailing Address 1002 25TH ST S

City
FARGO

State
ND

Zip Code
58103

Purpose of Disbursement
MAINTENANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2018			

FEC Identification Number

C []

Transaction ID : SB21.20005

Amount of Each Disbursement this Period

[] 42.66 []

Memo Item

Full Name (Last, First, Middle Initial)

B. SLACK

Mailing Address 500 HOWARD ST

City
SAN FRANCISCO

State
CA

Zip Code
94105

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2018			

FEC Identification Number

C []

Transaction ID : SB21.20006

Amount of Each Disbursement this Period

[] 72.00 []

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGET

Mailing Address 1000 NICOLLET MALL

City
MINNEAPOLIS

State
MN

Zip Code
55403

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2018			

FEC Identification Number

C []

Transaction ID : SB21.20003

Amount of Each Disbursement this Period

[] 53.93 []

Memo Item

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

[] 0.00 []

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)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. VISA

Mailing Address PO BOX 4512

City
CAROL STREAM

State
IL

Zip Code
60197

Purpose of Disbursement
CREDIT CARD FEE

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
10			19			2018			

FEC Identification Number

C

Transaction ID : SB21.20004

Amount of Each Disbursement this Period

14.03

Memo Item

Full Name (Last, First, Middle Initial)

B. WALMART

Mailing Address 4731 13TH AVE S

City
FARGO

State
ND

Zip Code
58103

Purpose of Disbursement
OFFICE SUPPLIES

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
10			19			2018			

FEC Identification Number

C

Transaction ID : SB21.20001

Amount of Each Disbursement this Period

65.14

Memo Item

Full Name (Last, First, Middle Initial)

C. VISA

Mailing Address PO BOX 4512

City
CAROL STREAM

State
IL

Zip Code
60197

Purpose of Disbursement
CREDIT CARD PAYMENT

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
10			19			2018			

FEC Identification Number

C

Transaction ID : SB21.10007

Amount of Each Disbursement this Period

216.77

Memo Item

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

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

216.77

**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)
North Dakota Republican Party

A. DAN'S SUPER MARKET

Full Name (Last, First, Middle Initial)

Mailing Address 3101 NORTH 11TH ST

City BISMARCK State ND Zip Code 58503

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2018

FEC Identification Number: C

Transaction ID : SB21.20008

Amount of Each Disbursement this Period: 66.55

Memo Item

B. ENTERPRISE RENT-A-CAR

Full Name (Last, First, Middle Initial)

Mailing Address 600 CORPORATE PARK DR

City ST LOUIS State MO Zip Code 63105

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2018

FEC Identification Number: C

Transaction ID : SB21.20009

Amount of Each Disbursement this Period: 108.93

Memo Item

C. WALMART

Full Name (Last, First, Middle Initial)

Mailing Address 4731 13TH AVE S

City FARGO State ND Zip Code 58103

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2018

FEC Identification Number: C

Transaction ID : SB21.20007

Amount of Each Disbursement this Period: 41.29

Memo Item

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

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)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. VISA

Mailing Address PO BOX 4512

City
CAROL STRAM

State
IL

Zip Code
60197

Purpose of Disbursement
CREDIT CARD PAYMENT

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
11			16			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21.10038

Amount of Each Disbursement this Period

[REDACTED] 4148.21

Memo Item

Full Name (Last, First, Middle Initial)

B. ADOBE

Mailing Address 345 PARK AVE

City
SAN JOSE

State
CA

Zip Code
95110

Purpose of Disbursement
WEB SERVICE

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
11			16			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21.20016

Amount of Each Disbursement this Period

[REDACTED] 21.29

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAS BEST VALUE INN

Mailing Address 1505 E INTERCHANGE AVE

City
BISMARCK

State
ND

Zip Code
58501

Purpose of Disbursement
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
11			16			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21.20011

Amount of Each Disbursement this Period

[REDACTED] 277.63

Memo Item

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

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

[REDACTED] 4148.21

[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)
North Dakota Republican Party

A. DAN'S SUPER MARKET

Full Name (Last, First, Middle Initial)

Mailing Address 3101 NORTH 11TH ST

City BISMARCK State ND Zip Code 58503

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB21.20020

Amount of Each Disbursement this Period: 92.29

Memo Item

B. EXXON

Full Name (Last, First, Middle Initial)

Mailing Address 1384 INTERCHANGE AVE

City BISMARCK State ND Zip Code 58501

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB21.20010

Amount of Each Disbursement this Period: 189.60

Memo Item

C. GOOGLE

Full Name (Last, First, Middle Initial)

Mailing Address 1600 AMPHITHEATRE PKWY

City MOUNTAIN VIEW State CA Zip Code 94048

Purpose of Disbursement WEB SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB21.20015

Amount of Each Disbursement this Period: 117.95

Memo Item

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

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)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. HOLIDAY STATION STORE

Mailing Address 2755 BRANDT DR S

City
FARGO

State
ND

Zip Code
58104

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C []
Transaction ID : SB21.20013
Amount of Each Disbursement this Period
[] 152.24

Memo Item

Full Name (Last, First, Middle Initial)

B. KATAHDIN STRATEGIES

Mailing Address 5 DICKENS RD

City
LINCOLNVILLE

State
ME

Zip Code
04849

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C []
Transaction ID : SB21.20018
Amount of Each Disbursement this Period
[] 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MAINSTAY SUITES

Mailing Address 1212 31ST AVE SW

City
MINOT

State
ND

Zip Code
58701

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2018			

FEC Identification Number

C []
Transaction ID : SB21.20012
Amount of Each Disbursement this Period
[] 437.13

Memo Item

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

[]	[]	[]	[]	[]	[]	[]	[]	[]	[]
						0.00			

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)
North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. MENARDS

Mailing Address 3300 STATE ST

City BISMARCK State ND Zip Code 58503

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2018

FEC Identification Number

C

Transaction ID : SB21.20021

Amount of Each Disbursement this Period

9.94

Memo Item

Full Name (Last, First, Middle Initial)

B. OFFICEMAX

Mailing Address 6600 NORTH MILITARY TRAIL

City BOCA RATON State FL Zip Code 33496

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2018

FEC Identification Number

C

Transaction ID : SB21.20014

Amount of Each Disbursement this Period

51.37

Memo Item

Full Name (Last, First, Middle Initial)

C. SLACK

Mailing Address 500 HOWARD ST

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2018

FEC Identification Number

C

Transaction ID : SB21.20017

Amount of Each Disbursement this Period

137.58

Memo Item

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

0.00

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)
North Dakota Republican Party

A. WALMART

Full Name (Last, First, Middle Initial)

Mailing Address 2551 32ND AVE S

City GRAND FORKS State ND Zip Code 58201

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB21.20019

Amount of Each Disbursement this Period: 161.19

Memo Item

B.

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

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

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

TOTAL This Period (last page this line number only)..... ▶ 30605.24

**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 checked="" 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)
North Dakota Republican Party

A. REPUBLICAN PARTY OF FLORIDA

Full Name (Last, First, Middle Initial)

Mailing Address 420 E JEFFERSON ST

City TALLAHASSEE State FL Zip Code 32301

Purpose of Disbursement TRANSFER

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Transaction ID : SB22.50000

Amount of Each Disbursement this Period: 36000.00

Memo Item

B.

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	36000.00
TOTAL This Period (last page this line number only).....▶	36000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

A. BUCKINGHAM, STEVE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 23 UNIVERSITY DR N

City FARGO State ND Zip Code 58102

Purpose of Disbursement TRAVEL/MILEAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Transaction ID : SB30.30010

Amount of Each Disbursement this Period: 234.67

Memo Item

B. BUCKINGHAM, STEVE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 23 UNIVERSITY DR N

City FARGO State ND Zip Code 58102

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 04 / 2018

FEC Identification Number: C

Transaction ID : SB30.30029

Amount of Each Disbursement this Period: 10000.00

Memo Item

C. DICKENS, TOM, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5 DICKENS RD

City LINCOLNVILLE State ME Zip Code 04849

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 04 / 2018

FEC Identification Number: C

Transaction ID : SB30.30030

Amount of Each Disbursement this Period: 3000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 13234.67

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

A. EINARSON, LANDEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1125 16TH ST N

City DFARGO State ND Zip Code 58102

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2018

FEC Identification Number: C

Transaction ID : SB30.30017

Amount of Each Disbursement this Period: 1041.57

Memo Item

B. EINARSON, LANDEN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1125 16TH ST N

City DFARGO State ND Zip Code 58102

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB30.30038

Amount of Each Disbursement this Period: 1041.56

Memo Item

C. HANSON, SADIE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 23 UNIVERSITY DR N

City FARGO State ND Zip Code 58102

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 25 / 2018

FEC Identification Number: C

Transaction ID : SB30.30006

Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2583.13

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. HANSON, SADIE, , ,

Mailing Address 23 UNIVERSITY DR N

City
FARGO

State
ND

Zip Code
58102

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

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
11			08			2018			

FEC Identification Number

C []
Transaction ID : SB30.30032
Amount of Each Disbursement this Period
[] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. HOERNER, ALAN, , ,

Mailing Address 316 TORONTO DR

City
BISMARCK

State
ND

Zip Code
58503

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

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
11			11			2018			

FEC Identification Number

C []
Transaction ID : SB30.30034
Amount of Each Disbursement this Period
[] 150.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KELLY, BRENDAN, , ,

Mailing Address 1009 20TH AVE SE

City
MINOT

State
ND

Zip Code
58701

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

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
10			30			2018			

FEC Identification Number

C []
Transaction ID : SB30.30008
Amount of Each Disbursement this Period
[] 6000.00

Memo Item

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

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

6650.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

Full Name (Last, First, Middle Initial) A. KELLY, BRENDAN, , ,		Date of Disbursement MM / DD / YYYY 11 / 16 / 2018	
Mailing Address 1009 20TH AVE SE		FEC Identification Number C [] Transaction ID : SB30.30047 Amount of Each Disbursement this Period [] 277.97	
City MINOT	State ND	Zip Code 58701	Category/ Type []
Purpose of Disbursement TRAVEL/MILEAGE		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:			

Full Name (Last, First, Middle Initial) B. KEMP, REID, , ,		Date of Disbursement MM / DD / YYYY 10 / 25 / 2018	
Mailing Address 23 UNIVERSITY DR N		FEC Identification Number C [] Transaction ID : SB30.30005 Amount of Each Disbursement this Period [] 500.00	
City FARGO	State ND	Zip Code 58102	Category/ Type []
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		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:			

Full Name (Last, First, Middle Initial) C. KEMP, REID, , ,		Date of Disbursement MM / DD / YYYY 11 / 08 / 2018	
Mailing Address 23 UNIVERSITY DR N		FEC Identification Number C [] Transaction ID : SB30.30031 Amount of Each Disbursement this Period [] 500.00	
City FARGO	State ND	Zip Code 58102	Category/ Type []
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1277.97
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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

Full Name (Last, First, Middle Initial) A. KOBUS, HEATHER, , ,		Date of Disbursement MM / DD / YYYY 10 / 22 / 2018	
Mailing Address 920 CASCADE WAY NW APT 310		FEC Identification Number C [REDACTED] Transaction ID : SB30.30000 Amount of Each Disbursement this Period [REDACTED] 147.71	
City MANDAN	State ND	Zip Code 58554	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL/MILEAGE		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:			

Full Name (Last, First, Middle Initial) B. KOBUS, HEATHER, , ,		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018	
Mailing Address 920 CASCADE WAY NW APT 310		FEC Identification Number C [REDACTED] Transaction ID : SB30.30016 Amount of Each Disbursement this Period [REDACTED] 1536.75	
City MANDAN	State ND	Zip Code 58554	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		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:			

Full Name (Last, First, Middle Initial) C. KOBUS, HEATHER, , ,		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018	
Mailing Address 920 CASCADE WAY NW APT 310		FEC Identification Number C [REDACTED] Transaction ID : SB30.30024 Amount of Each Disbursement this Period [REDACTED] 141.82	
City MANDAN	State ND	Zip Code 58554	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL/MILEAGE		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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1826.28
TOTAL 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

Full Name (Last, First, Middle Initial) A. KOBUS, HEATHER, , ,		Date of Disbursement MM / DD / YYYY 11 / 04 / 2018
Mailing Address 920 CASCADE WAY NW APT 310		FEC Identification Number C [REDACTED] Transaction ID : SB30.30026 Amount of Each Disbursement this Period [REDACTED] 277.89
City MANDAN	State ND	Zip Code 58554
Purpose of Disbursement TRAVEL/FOOD/BEVERAGE/REGITRATION FEE		Category/ Type [REDACTED]
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. MOTEL 6		Date of Disbursement MM / DD / YYYY 11 / 04 / 2018
Mailing Address 1325 19TH AVE		FEC Identification Number C [REDACTED] Transaction ID : SB30.40007 Amount of Each Disbursement this Period [REDACTED] 98.31
City WILLISTON	State ND	Zip Code 58801
Purpose of Disbursement TRAVEL		Category/ Type [REDACTED]
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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ND STATE FAIR		Date of Disbursement MM / DD / YYYY 11 / 04 / 2018
Mailing Address 2005 E BURDICK EXPY		FEC Identification Number C [REDACTED] Transaction ID : SB30.40003 Amount of Each Disbursement this Period [REDACTED] 43.42
City MINOT	State ND	Zip Code 58701
Purpose of Disbursement REIGISTRATION FEE		Category/ Type [REDACTED]
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 checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 277.89
TOTAL 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. PIZZA HUT

Mailing Address 2400 10TH ST SW

City
MINOT

State
ND

Zip Code
58701

Purpose of Disbursement
FOOD/BEVERAGE

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
11			04			2018			

FEC Identification Number

C []

Transaction ID : SB30.40004

Amount of Each Disbursement this Period

[] 27.70 []

Memo Item

Full Name (Last, First, Middle Initial)

B. RED TRAIL PETRO

Mailing Address 2511 OLD RED TRAIL

City
MANDAN

State
ND

Zip Code
58554

Purpose of Disbursement
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
11			04			2018			

FEC Identification Number

C []

Transaction ID : SB30.40006

Amount of Each Disbursement this Period

[] 98.50 []

Memo Item

Full Name (Last, First, Middle Initial)

C. STARBUCKS

Mailing Address 2124 N 12TH ST

City
BISMARCK

State
ND

Zip Code
58501

Purpose of Disbursement
FOOD/BEVERAGE

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
11			04			2018			

FEC Identification Number

C []

Transaction ID : SB30.40005

Amount of Each Disbursement this Period

[] 9.96 []

Memo Item

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

[] 0.00 []

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

A. KOBUS, HEATHER, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 920 CASCADE WAY NW
APT 310

City MANDAN State ND Zip Code 58554

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 15 / 2018

FEC Identification Number: C
Transaction ID : SB30.30037
Amount of Each Disbursement this Period: 1536.75

Memo Item

B. KOBUS, HEATHER, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 920 CASCADE WAY NW
APT 310

City MANDAN State ND Zip Code 58554

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 16 / 2018

FEC Identification Number: C
Transaction ID : SB30.30045
Amount of Each Disbursement this Period: 43.57

Memo Item

C. LITTLE CAESARS

Full Name (Last, First, Middle Initial)

Mailing Address 2930 N 14TH ST
SUITE 300

City BISMARCK State ND Zip Code 58503

Purpose of Disbursement REIGISTRATION FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 16 / 2018

FEC Identification Number: C
Transaction ID : SB30.40011
Amount of Each Disbursement this Period: 19.32

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1580.32

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. MCDONALDS

Mailing Address 605 E MAIN AVE

City
BISMARCK

State
ND

Zip Code
58501

Purpose of Disbursement
FOOD/BEVERAGE

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
11			16			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB30.40012

Amount of Each Disbursement this Period

[REDACTED] 12.43

Memo Item

Full Name (Last, First, Middle Initial)

B. WALMART

Mailing Address 2551 32ND AVE S

City
GRAND FORKS

State
ND

Zip Code
58201

Purpose of Disbursement
OFFICE SUPPLIES

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
11			16			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB30.40013

Amount of Each Disbursement this Period

[REDACTED] 11.82

Memo Item

Full Name (Last, First, Middle Initial)

C. LUCERO, TERIN, , ,

Mailing Address 1144 COLLEGE ST N

City
FARGO

State
ND

Zip Code
58102

Purpose of Disbursement
PAYROLL

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
10			31			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB30.30018

Amount of Each Disbursement this Period

[REDACTED] 523.62

Memo Item

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

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

[REDACTED] 523.62

[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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. LUCERO, TERIN, , ,

Mailing Address 1144 COLLEGE ST N

City
FARGO

State
ND

Zip Code
58102

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

FEC Identification Number

C []
Transaction ID : SB30.30039
Amount of Each Disbursement this Period
[] 523.63

Memo Item

Full Name (Last, First, Middle Initial)

B. NUNNENKAMP, PHILIPPE, , ,

Mailing Address 1222 4TH AVE N
#403

City
FARGO

State
ND

Zip Code
58102

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2018			

FEC Identification Number

C []
Transaction ID : SB30.30001
Amount of Each Disbursement this Period
[] 460.64

Memo Item

Full Name (Last, First, Middle Initial)

C. EXXON

Mailing Address 5959 LAS COLINAS BLVD

City
IRVING

State
TX

Zip Code
75039

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2018			

FEC Identification Number

C []
Transaction ID : SB30.40001
Amount of Each Disbursement this Period
[] 174.85

Memo Item

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

[] 984.27

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

Full Name (Last, First, Middle Initial) A. NOBLE INN		Date of Disbursement MM / DD / YYYY 10 / 22 / 2018
Mailing Address 1009 20TH AVE SE		FEC Identification Number C [REDACTED] Transaction ID : SB30.40002 Amount of Each Disbursement this Period [REDACTED] 87.54
City MINOT	State ND	Zip Code 58701
Purpose of Disbursement TRAVEL	Category/Type [REDACTED]	
Candidate Name	Memo Item <input checked="" type="checkbox"/>	
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. RADISON		Date of Disbursement MM / DD / YYYY 10 / 22 / 2018
Mailing Address 605 E BROADWAY AVE		FEC Identification Number C [REDACTED] Transaction ID : SB30.40000 Amount of Each Disbursement this Period [REDACTED] 198.25
City BISMARCK	State ND	Zip Code 58501
Purpose of Disbursement TRAVEL	Category/Type [REDACTED]	
Candidate Name	Memo Item <input checked="" type="checkbox"/>	
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) C. NUNNENKAMP, PHILIPPE, , ,		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018
Mailing Address 1222 4TH AVE N 403		FEC Identification Number C [REDACTED] Transaction ID : SB30.30019 Amount of Each Disbursement this Period [REDACTED] 2012.94
City FARGO	State ND	Zip Code 58102
Purpose of Disbursement PAYROLL	Category/Type [REDACTED]	
Candidate Name	Memo Item <input type="checkbox"/>	
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2012.94
TOTAL 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. NUNNENKAMP, PHILIPPE, , ,

Mailing Address 1222 4TH AVE N
403

City
FARGO

State
ND

Zip Code
58102

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB30.30028

Amount of Each Disbursement this Period

[REDACTED] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. NUNNENKAMP, PHILIPPE, , ,

Mailing Address 1222 4TH AVE N
403

City
FARGO

State
ND

Zip Code
58102

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB30.30040

Amount of Each Disbursement this Period

[REDACTED] 2012.94

Memo Item

Full Name (Last, First, Middle Initial)

C. OLSON, TANNER, , ,

Mailing Address 1029 N 5TH ST

City
BISMARCK

State
ND

Zip Code
58501

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB30.30020

Amount of Each Disbursement this Period

[REDACTED] 424.17

Memo Item

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

[REDACTED] 7437.11

TOTAL 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

Full Name (Last, First, Middle Initial) A. OLSON, TANNER, , ,		Date of Disbursement MM / DD / YYYY 11 / 15 / 2018	
Mailing Address 1029 N 5TH ST		FEC Identification Number C [REDACTED] Transaction ID : SB30.30041 Amount of Each Disbursement this Period [REDACTED] 424.17	
City BISMARCK	State ND	Zip Code 58501	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		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:			

Full Name (Last, First, Middle Initial) B. PORTER, SARAH, , ,		Date of Disbursement MM / DD / YYYY 10 / 25 / 2018	
Mailing Address 23 UNIVERSITY DR N		FEC Identification Number C [REDACTED] Transaction ID : SB30.30007 Amount of Each Disbursement this Period [REDACTED] 500.00	
City FARGO	State ND	Zip Code 58102	Category/ Type [REDACTED]
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		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:			

Full Name (Last, First, Middle Initial) C. PORTER, SARAH, , ,		Date of Disbursement MM / DD / YYYY 11 / 08 / 2018	
Mailing Address 23 UNIVERSITY DR N		FEC Identification Number C [REDACTED] Transaction ID : SB30.30033 Amount of Each Disbursement this Period [REDACTED] 500.00	
City FARGO	State ND	Zip Code 58102	Category/ Type [REDACTED]
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1424.17
TOTAL 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

Full Name (Last, First, Middle Initial) A. PORTER, SARAH, , ,		Date of Disbursement MM / DD / YYYY 11 / 16 / 2018	
Mailing Address 23 UNIVERSITY DR N		FEC Identification Number C [REDACTED] Transaction ID : SB30.30046 Amount of Each Disbursement this Period [REDACTED] 250.00	
City FARGO	State ND	Zip Code 58102	Category/ Type [REDACTED]
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		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:			

Full Name (Last, First, Middle Initial) B. SANFORD, BYRON, , ,		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018	
Mailing Address 1029 N 5TH ST		FEC Identification Number C [REDACTED] Transaction ID : SB30.30021 Amount of Each Disbursement this Period [REDACTED] 1758.97	
City BISMARCK	State ND	Zip Code 58501	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		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:			

Full Name (Last, First, Middle Initial) C. SANFORD, BYRON, , ,		Date of Disbursement MM / DD / YYYY 11 / 15 / 2018	
Mailing Address 1029 N 5TH ST		FEC Identification Number C [REDACTED] Transaction ID : SB30.30042 Amount of Each Disbursement this Period [REDACTED] 1758.98	
City BISMARCK	State ND	Zip Code 58501	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 3767.95
TOTAL 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

Full Name (Last, First, Middle Initial) A. SCHEFTER, DAWSON, , ,		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018	
Mailing Address 5000 28TH AVE S UNIT 304		FEC Identification Number C [REDACTED] Transaction ID : SB30.30022 Amount of Each Disbursement this Period [REDACTED] 1575.44	
City FARGO	State ND	Zip Code 58103	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		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:			

Full Name (Last, First, Middle Initial) B. SCHEFTER, DAWSON, , ,		Date of Disbursement MM / DD / YYYY 11 / 15 / 2018	
Mailing Address 5000 28TH AVE S UNIT 304		FEC Identification Number C [REDACTED] Transaction ID : SB30.30043 Amount of Each Disbursement this Period [REDACTED] 6012.94	
City FARGO	State ND	Zip Code 58103	Category/ Type [REDACTED]
Purpose of Disbursement PAYROLL		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:			

Full Name (Last, First, Middle Initial) C. SPENCER, TYLER, , ,		Date of Disbursement MM / DD / YYYY 11 / 04 / 2018	
Mailing Address 3415 20TH AVE S #316		FEC Identification Number C [REDACTED] Transaction ID : SB30.30027 Amount of Each Disbursement this Period [REDACTED] 144.04	
City GRAND FORKS	State ND	Zip Code 58201	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL/MILEAGE/FOOD BEVERAGE/OFFICE SUPPLIES		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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 7732.42
TOTAL 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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. SPENCER, TYLER, , ,

Mailing Address 3415 20TH AVE S
#316

City GRAND FORKS State ND Zip Code 58201

Purpose of Disbursement TRAVEL/MILEAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 04 / 2018

FEC Identification Number

C

Transaction ID : SB30.40008

Amount of Each Disbursement this Period

70.48

Memo Item

Full Name (Last, First, Middle Initial)

B. DEEKS PIZZA

Mailing Address 512 N WASHINGTON ST

City GARND FORKS State ND Zip Code 58203

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 04 / 2018

FEC Identification Number

C

Transaction ID : SB30.40010

Amount of Each Disbursement this Period

22.99

Memo Item

Full Name (Last, First, Middle Initial)

C. WALMART

Mailing Address 2551 32ND AVE S

City GRAND FORKS State ND Zip Code 58201

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 04 / 2018

FEC Identification Number

C

Transaction ID : SB30.40009

Amount of Each Disbursement this Period

50.57

Memo Item

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

0.00

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

Full Name (Last, First, Middle Initial) A. TOMAN, ANDREA, , ,		Date of Disbursement MM / DD / YYYY 11 / 16 / 2018	
Mailing Address 218 W AVE D		FEC Identification Number C	
City BISMARCK	State ND	Zip Code 58501	Transaction ID : SB30.30049
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type	Amount of Each Disbursement this Period 500.00
Candidate Name			<input type="checkbox"/> Memo Item
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. WILKINS, JACOB, , ,		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018	
Mailing Address 1029 N 5TH ST		FEC Identification Number C	
City BISMARCK	State ND	Zip Code 58501	Transaction ID : SB30.30023
Purpose of Disbursement PAYROLL		Category/ Type	Amount of Each Disbursement this Period 2165.15
Candidate Name			<input type="checkbox"/> Memo Item
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) C. WILKINS, JACOB, , ,		Date of Disbursement MM / DD / YYYY 11 / 15 / 2018	
Mailing Address 1029 N 5TH ST		FEC Identification Number C	
City BISMARCK	State ND	Zip Code 58501	Transaction ID : SB30.30044
Purpose of Disbursement PAYROLL		Category/ Type	Amount of Each Disbursement this Period 6165.14
Candidate Name			<input type="checkbox"/> Memo Item
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	8830.29
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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. ADVANTAGE DIRECT

Mailing Address 2300 CLARENDON BLVD
SUITE 303

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
PHONE SVC

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30.30003
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ADVANTAGE DIRECT

Mailing Address 2300 CLARENDON BLVD
SUITE 303

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement
PHONE SVC

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30.30035
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. BSC STUDENT FINANCE

Mailing Address PO BOX 5587

City BISMARCK State ND Zip Code 58506

Purpose of Disbursement
FACILITY RENTAL/CATERING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB30.30050
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

Full Name (Last, First, Middle Initial) A. CAVALIER COMMUNICATIONS LLC		Date of Disbursement MM / DD / YYYY 10 / 24 / 2018
Mailing Address 1701 W 31ST ST		FEC Identification Number C [REDACTED] Transaction ID : SB30.30002 Amount of Each Disbursement this Period 48878.23
City AUSTIN	State TX	Zip Code 78703
Purpose of Disbursement PRINTING/POSTAGE		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. CAVALIER COMMUNICATIONS LLC		Date of Disbursement MM / DD / YYYY 10 / 25 / 2018
Mailing Address 1701 W 31ST ST		FEC Identification Number C [REDACTED] Transaction ID : SB30.30004 Amount of Each Disbursement this Period 29166.98
City AUSTIN	State TX	Zip Code 78703
Purpose of Disbursement PRINTING/POSTAGE		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) C. CAVALIER COMMUNICATIONS LLC		Date of Disbursement MM / DD / YYYY 10 / 30 / 2018
Mailing Address 1701 W 31ST ST		FEC Identification Number C [REDACTED] Transaction ID : SB30.30011 Amount of Each Disbursement this Period 33129.03
City AUSTIN	State TX	Zip Code 78703
Purpose of Disbursement PRINTING/POSTAGE		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	

SUBTOTAL of Disbursements This Page (optional).....▶	111174.24
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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. CAVALIER COMMUNICATIONS LLC

Mailing Address 1701 W 31ST ST

City
AUSTIN

State
TX

Zip Code
78703

Purpose of Disbursement
PRINTING/POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B-91063

Amount of Each Disbursement this Period

[REDACTED] 19032.51

Memo Item

Full Name (Last, First, Middle Initial)

B. FLS CONNECT

Mailing Address 7300 HUDSON BLVD
SUITE 270

City
SAINT PAUL

State
MN

Zip Code
55128

Purpose of Disbursement
MESSAGE PHONE CALLS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB30.30012

Amount of Each Disbursement this Period

[REDACTED] 48168.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FLS CONNECT

Mailing Address 7300 HUDSON BLVD
SUITE 270

City
SAINT PAUL

State
MN

Zip Code
55128

Purpose of Disbursement
MESSAGE PHONE CALLS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

FEC Identification Number

C [REDACTED]

Transaction ID : SB30B-9911

Amount of Each Disbursement this Period

[REDACTED] 92297.57

Memo Item

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

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

[REDACTED] 159498.08

[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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

A. FORUM COMMUNICATIONS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2020

City FARGO State ND Zip Code 58107

Purpose of Disbursement PRINTING/POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2018

FEC Identification Number: C

Transaction ID : SB30.30009

Amount of Each Disbursement this Period: 2836.65

Memo Item

B. JUMPWORLDWIDE LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 99

City CENTER CROSS State VA Zip Code 22437

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 22 / 2018

FEC Identification Number: C

Transaction ID : SB30.30051

Amount of Each Disbursement this Period: 500.00

Memo Item

C. LINCOLN STRATEGIES

Full Name (Last, First, Middle Initial)

Mailing Address 740 S MILL AVE SUITE 200

City TEMPE State AZ Zip Code 58501

Purpose of Disbursement WEB SERVICE/MEDIA/GOTV

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2018

FEC Identification Number: C

Transaction ID : SB30.30014

Amount of Each Disbursement this Period: 24000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 27336.65

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
North Dakota Republican Party

A. LINCOLN STRATEGIES

Full Name (Last, First, Middle Initial)

Mailing Address 740 S MILL AVE
SUITE 200

City TEMPE State AZ Zip Code 58501

Purpose of Disbursement WEB SERVICE/MEDIA/GOTV

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 03 / 2018

FEC Identification Number: C

Transaction ID : SB30.30025

Amount of Each Disbursement this Period: 10000.00

Memo Item

B. PAYCHEX

Full Name (Last, First, Middle Initial)

Mailing Address 911 PANORAMA TRAIL S

City ROCHESTER State NY Zip Code 14625

Purpose of Disbursement PAYROLL SVC/TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 31 / 2018

FEC Identification Number: C

Transaction ID : SB30.30015

Amount of Each Disbursement this Period: 3819.42

Memo Item

C. PAYCHEX

Full Name (Last, First, Middle Initial)

Mailing Address 911 PANORAMA TRAIL S

City ROCHESTER State NY Zip Code 14625

Purpose of Disbursement PAYROLL SVC/TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB30.30036

Amount of Each Disbursement this Period: 7736.95

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 21556.37

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 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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

North Dakota Republican Party

Full Name (Last, First, Middle Initial)

A. VISA

Mailing Address PO BOX 4512

City
CAROL STRAM

State
IL

Zip Code
60197

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 16 / 2018

FEC Identification Number

C

Transaction ID : SB30.30048

Amount of Each Disbursement this Period

759.43

Memo Item

Full Name (Last, First, Middle Initial)

B. NEXTDAY FLYERS

Mailing Address 10932 CA-2

City
LOSANGELES

State
CA

Zip Code
90025

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 16 / 2018

FEC Identification Number

C

Transaction ID : SB30.40014

Amount of Each Disbursement this Period

759.43

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

759.43

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

403159.84

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) North Dakota Republican Party	FEC IDENTIFICATION NUMBER ▼ C C00018929
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item FORUM COMMUNICATIONS COMPANY		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address PO BOX 2020		Amount <input type="text"/>	
City FARGO	State ND	Zip Code 58107	Transaction ID : SE24-1.0001
Purpose of Expenditure ADVERTISING		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CRAMER, KEVIN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>ND</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item FORUM COMMUNICATIONS COMPANY		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address PO BOX 2020		Amount <input type="text"/>	
City FARGO	State ND	Zip Code 58107	Transaction ID : SE24-1.0002
Purpose of Expenditure ADVERTISING		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: HEITKAMP, HEIDI, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>ND</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, , , *[Electronically Filed]* Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
North Dakota Republican Party
FEC IDENTIFICATION NUMBER
C C00018929

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
FORUM COMMUNICATIONS COMPANY
Mailing Address PO BOX 2020
City FARGO State ND Zip Code 58107
Purpose of Expenditure ADVERTISING
Name of Federal Candidate: CRAMER, KEVIN, , ,
Calendar Year-To-Date Per Election for Office Sought 738902.38
Disbursement For: General 2018

Full Name of Payee
FORUM COMMUNICATIONS COMPANY
Mailing Address PO BOX 2020
City FARGO State ND Zip Code 58107
Purpose of Expenditure ADVERTISING
Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Calendar Year-To-Date Per Election for Office Sought 738902.38
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 640.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, , ,

[Electronically Filed]

Date 10 / 20 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
North Dakota Republican Party
FEC IDENTIFICATION NUMBER
C C00018929

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee CAVALIER COMMUNICATIONS LLC
Mailing Address 1701 W 31ST ST
City AUSTIN State TX Zip Code 78703
Purpose of Expenditure PRINTING/POSTAGE
Name of Federal Candidate: HEITKAMP, HEIDI, ,
Calendar Year-To-Date Per Election for Office Sought 738902.38
Date of Public Distribution/Dissemination 10/23/2018
Amount 34495.99
Transaction ID : SE24-1.0005
Date of Disbursement or Obligation 10/22/2018
Office Sought: Senate State: ND
Disbursement For: General 2018

Full Name of Payee STORYTELLERS GROUP LLC
Mailing Address PO BOX 577001
City CHICAGO State IL Zip Code 60657
Purpose of Expenditure PRINTING/POSTAGE
Name of Federal Candidate: HEITKAMP, HEIDI, ,
Calendar Year-To-Date Per Election for Office Sought 738902.38
Date of Public Distribution/Dissemination 10/24/2018
Amount 78821.00
Transaction ID : SE24-1.0006
Date of Disbursement or Obligation 10/23/2018
Office Sought: Senate State: ND
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 113316.99
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, ,

[Electronically Filed]

Date

10/24/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) North Dakota Republican Party
FEC IDENTIFICATION NUMBER C C00018929

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee STORYTELLERS GROUP LLC
Mailing Address PO BOX 577001
City CHICAGO State IL Zip Code 60657
Purpose of Expenditure PRINTING/POSTAGE/PRODUCTION
Date of Public Distribution/Dissemination 10/24/2018
Amount 9796.00
Transaction ID: SE24-1.0007
Date of Disbursement or Obligation 10/23/2018
Name of Federal Candidate: ARMSTRONG, KELLY, , ,
Office Sought: House District: 00 State: ND
Disbursement For: General 2018

Full Name of Payee LINCOLN STRATEGIES
Mailing Address 740 S MILL AVE SUITE 200
City TEMPE State AZ Zip Code 58501
Purpose of Expenditure MEDIA/WEB SERVICE
Date of Public Distribution/Dissemination 10/24/2018
Amount 1000.00
Transaction ID: SE24-1.0008
Date of Disbursement or Obligation 10/24/2018
Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Office Sought: Senate State: ND
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 10796.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, , ,

[Electronically Filed]

Date 10/25/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
North Dakota Republican Party
FEC IDENTIFICATION NUMBER
C C00018929

Check if 24-hour report 48-hour report
New report Amends report filed on 10/24/2018

Full Name of Payee VISA
Mailing Address PO BOX 4512
City CAROL STREAM State IL Zip Code 60197
Purpose of Expenditure MEDIA PRODUCTION
Name of Federal Candidate: HEITKAMP, HEIDI, ,
Calendar Year-To-Date Per Election for Office Sought 738902.38
Disbursement For: General 2018

Full Name of Payee ADOBE
Mailing Address 345 PARK AVE
City SAN JOSE State CA Zip Code 95110
Purpose of Expenditure MEDIA PRODUCTION
Name of Federal Candidate: HEITKAMP, HEIDI, ,
Calendar Year-To-Date Per Election for Office Sought 738902.38
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 179.15
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, , [Electronically Filed] Date 10/25/2018
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
North Dakota Republican Party
FEC IDENTIFICATION NUMBER
C C00018929

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: NEO SOUNDS
Mailing Address: VICTORIA HOUSE 26 MAIN ST SUITES 41/42
City: GIBRALTER State: FF Zip Code: 99999
Purpose of Expenditure: MEDIA PRODUCTION
Date of Public Distribution/Dissemination: 10/24/2018
Amount: 34.95
Transaction ID: SE24-2.0001
Date of Disbursement or Obligation: 10/24/2018
Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Support: [] Oppose: [x]
Office Sought: [] House [] Senate [x] District: 00 State: ND
Calendar Year-To-Date Per Election for Office Sought: 738902.38
Disbursement For: [] Primary [x] General 2018 [] Other (specify)

Full Name of Payee: SCHEFTER, DAWSON, , ,
Mailing Address: 5000 28TH AVE S UNIT 304
City: FARGO State: ND Zip Code: 58103
Purpose of Expenditure: PAYROLL-PRO-RATED MEDIA PRODUCTION
Date of Public Distribution/Dissemination: 10/24/2018
Amount: 218.75
Transaction ID: SE24-1.0010
Date of Disbursement or Obligation: 10/24/2018
Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Support: [] Oppose: [x]
Office Sought: [] House [] Senate [x] District: 00 State: ND
Calendar Year-To-Date Per Election for Office Sought: 738902.38
Disbursement For: [] Primary [x] General 2018 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 218.75
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, , ,

[Electronically Filed]

Date 10/25/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
North Dakota Republican Party
FEC IDENTIFICATION NUMBER
C C00018929

Check if 24-hour report 48-hour report
New report Amends report filed on 10/24/2018

Full Name of Payee: JUMP WORLDWIDE LLC
Mailing Address: PO BOX 99
City: CENTER CROSS, State: VA, Zip Code: 22437
Purpose of Expenditure: MEDIA PRODUCTION
Date of Public Distribution/Dissemination: 10/24/2018
Amount: 500.00
Transaction ID: SE24-1.0011
Date of Disbursement or Obligation: 10/25/2018
Name of Federal Candidate: HEITKAMP, HEIDI, ,
Office Sought: Senate
Disbursement For: General

Full Name of Payee: LINCOLN STRATEGIES
Mailing Address: 740 S MILL AVE, SUITE 200
City: TEMPE, State: AZ, Zip Code: 58501
Purpose of Expenditure: MEDIA/WEB SERVICE
Date of Public Distribution/Dissemination: 10/24/2018
Amount: 750.00
Transaction ID: SE24-1.0012
Date of Disbursement or Obligation: 10/25/2018
Name of Federal Candidate: HEITKAMP, HEIDI, ,
Office Sought: Senate
Disbursement For: General

(a) SUBTOTAL of Itemized Independent Expenditures 1250.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, ,

[Electronically Filed]

Date 10/25/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
North Dakota Republican Party
FEC IDENTIFICATION NUMBER
C C00018929

Check if 24-hour report 48-hour report
New report Amends report filed on 10/24/2018

Full Name of Payee VISA
Mailing Address PO BOX 4512
City CAROL STREAM State IL Zip Code 60197
Purpose of Expenditure MEDIA PRODUCTION
Date of Public Distribution/Dissemination 10/24/2018
Amount 453.30
Transaction ID: SE24-1.0013
Date of Disbursement or Obligation 10/25/2018
Name of Federal Candidate: HEITKAMP, HEIDI, ,
Support Oppose
Office Sought: House Senate
District: 00 State: ND
Calendar Year-To-Date Per Election for Office Sought 738902.38
Disbursement For: Primary General
Other (specify)

Full Name of Payee ADOBE
Mailing Address 345 PARK AVE
City SAN JOSE State CA Zip Code 95110
Purpose of Expenditure MEDIA PRODUCTION
Date of Public Distribution/Dissemination 10/24/2018
Amount 383.40
Transaction ID: SE24-2.0002
Date of Disbursement or Obligation 10/25/2018
Name of Federal Candidate: HEITKAMP, HEIDI, ,
Support Oppose
Office Sought: House Senate
District: 00 State: ND
Calendar Year-To-Date Per Election for Office Sought 738902.38
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 453.30
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, ,

[Electronically Filed]

Date 10/25/2018

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) North Dakota Republican Party	FEC IDENTIFICATION NUMBER ▼ C C00018929
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee NEO SOUNDS <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address VICTORIA HOUSE 26 MAIN ST SUITES 41/42	Amount <input type="text"/> 69.90 Transaction ID : SE24-2.0003 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code GIBRALTER FF 99999	
Purpose of Expenditure MEDIA PRODUCTION Category/Type <input type="text"/>	
Name of Federal Candidate: HEITKAMP, HEIDI, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: ND
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 738902.38	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee SCHEFTER, DAWSON, , , <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 5000 28TH AVE S UNIT 304	Amount <input type="text"/> 218.75 Transaction ID : SE24-1.0014 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code FARGO ND 58103	
Purpose of Expenditure PAYROLL-PRO-RATED MEDIA PRODUCTION Category/Type <input type="text"/>	
Name of Federal Candidate: HEITKAMP, HEIDI, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: ND
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 738902.38	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 218.75
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, , ,

[Electronically Filed]

Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
North Dakota Republican Party
FEC IDENTIFICATION NUMBER
C C00018929

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
FORUM COMMUNICATIONS COMPANY
Mailing Address PO BOX 2020
City FARGO State ND Zip Code 58107
Purpose of Expenditure ADVERTISING
Name of Federal Candidate: CRAMER, KEVIN, , ,
Calendar Year-To-Date Per Election for Office Sought 738902.38
Disbursement For: General 2018

Full Name of Payee
FORUM COMMUNICATIONS COMPANY
Mailing Address PO BOX 2020
City FARGO State ND Zip Code 58107
Purpose of Expenditure ADVERTISING
Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Calendar Year-To-Date Per Election for Office Sought 738902.38
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 1680.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, , , [Electronically Filed]
Signature Date 10 / 29 / 2018

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
North Dakota Republican Party
FEC IDENTIFICATION NUMBER
C C00018929

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
FORUM COMMUNICATIONS COMPANY
Mailing Address PO BOX 2020
City FARGO State ND Zip Code 58107
Purpose of Expenditure ADVERTISING
Name of Federal Candidate: CRAMER, KEVIN, , ,
Calendar Year-To-Date Per Election for Office Sought 738902.38
Disbursement For: General 2018

Full Name of Payee
FORUM COMMUNICATIONS COMPANY
Mailing Address PO BOX 2020
City FARGO State ND Zip Code 58107
Purpose of Expenditure ADVERTISING
Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Calendar Year-To-Date Per Election for Office Sought 738902.38
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 1680.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, , ,

[Electronically Filed]

Date

10 / 29 / 2018

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) North Dakota Republican Party	FEC IDENTIFICATION NUMBER ▼ C C00018929
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item FORUM COMMUNICATIONS COMPANY		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address PO BOX 2020		Amount <input type="text"/>	
City FARGO	State ND	Zip Code 58107	Transaction ID : SE24-1.0019
Purpose of Expenditure ADVERTISING		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CRAMER, KEVIN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>ND</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item FORUM COMMUNICATIONS COMPANY		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address PO BOX 2020		Amount <input type="text"/>	
City FARGO	State ND	Zip Code 58107	Transaction ID : SE24-1.0020
Purpose of Expenditure ADVERTISING		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: HEITKAMP, HEIDI, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>ND</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, , , [Electronically Filed] Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
North Dakota Republican Party
FEC IDENTIFICATION NUMBER
C C00018929

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
FORUM COMMUNICATIONS COMPANY
Mailing Address PO BOX 2020
City FARGO State ND Zip Code 58107
Purpose of Expenditure ADVERTISING
Name of Federal Candidate: CRAMER, KEVIN, , ,
Calendar Year-To-Date Per Election for Office Sought 738902.38
Disbursement For: General 2018

Full Name of Payee
FORUM COMMUNICATIONS COMPANY
Mailing Address PO BOX 2020
City FARGO State ND Zip Code 58107
Purpose of Expenditure ADVERTISING
Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Calendar Year-To-Date Per Election for Office Sought 738902.38
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 400.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, , ,

[Electronically Filed]

Date 10 / 31 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
North Dakota Republican Party
FEC IDENTIFICATION NUMBER
C C00018929

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
FORUM COMMUNICATIONS COMPANY
Mailing Address PO BOX 2020
City FARGO State ND Zip Code 58107
Purpose of Expenditure ADVERTISING
Name of Federal Candidate: CRAMER, KEVIN, , ,
Calendar Year-To-Date Per Election for Office Sought 738902.38
Disbursement For: General 2018

Full Name of Payee
FORUM COMMUNICATIONS COMPANY
Mailing Address PO BOX 2020
City FARGO State ND Zip Code 58107
Purpose of Expenditure ADVERTISING
Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Calendar Year-To-Date Per Election for Office Sought 738902.38
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 480.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, , , [Electronically Filed] Date 10 / 31 / 2018
Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) North Dakota Republican Party	FEC IDENTIFICATION NUMBER ▼ C C00018929
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item FORUM COMMUNICATIONS COMPANY			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address PO BOX 2020			Amount <input type="text"/>		
City FARGO	State ND	Zip Code 58107	Transaction ID : SE24-1.0025		
Purpose of Expenditure ADVERTISING		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: CRAMER, KEVIN, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>ND</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		738902.38	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item FORUM COMMUNICATIONS COMPANY			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address PO BOX 2020			Amount <input type="text"/>		
City FARGO	State ND	Zip Code 58107	Transaction ID : SE24-1.0026		
Purpose of Expenditure ADVERTISING		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: HEITKAMP, HEIDI, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>ND</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		738902.38	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, , ,

[Electronically Filed]

Date / /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) North Dakota Republican Party	FEC IDENTIFICATION NUMBER ▼ C C00018929
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee VISA <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO BOX 4512	Amount <input type="text"/>
City CAROL STREAM State IL Zip Code 60197	Transaction ID : SE24-1.0027 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure MEDIA PRODUCTION Category/Type <input type="text"/>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose HEITKAMP, HEIDI, , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> State: <u>ND</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 738902.38	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee ADOBE <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 345 PARK AVE	Amount <input type="text"/>
City SAN JOSE State CA Zip Code 95110	Transaction ID : SE24-2.0004 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure MEDIA PRODUCTION Category/Type <input type="text"/>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose HEITKAMP, HEIDI, , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u>00</u> State: <u>ND</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 738902.38	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 153.36
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, , , [Electronically Filed] Date / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
North Dakota Republican Party
FEC IDENTIFICATION NUMBER
C C00018929

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
LINCOLN STRATEGIES
Mailing Address
740 S MILL AVE
SUITE 200
City
TEMPE
State
AZ
Zip Code
58501
Purpose of Expenditure
MEDIA/WEB SERVICE
Category/Type
Date of Public Distribution/Dissemination
10 / 30 / 2018
Amount
4000.00
Transaction ID : SE24-1.0028
Date of Disbursement or Obligation
10 / 30 / 2018

Name of Federal Candidate:
HEITKAMP, HEIDI, ,
Support
Oppose
Office Sought:
House
Senate
District: 00
State: ND
Calendar Year-To-Date
Per Election for Office Sought
738902.38
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
LINCOLN STRATEGIES
Mailing Address
740 S MILL AVE
SUITE 200
City
TEMPE
State
AZ
Zip Code
58501
Purpose of Expenditure
MEDIA/WEB SERVICE
Category/Type
Date of Public Distribution/Dissemination
11 / 03 / 2018
Amount
15000.00
Transaction ID : SE24-1.0029
Date of Disbursement or Obligation
11 / 03 / 2018

Name of Federal Candidate:
HEITKAMP, HEIDI, ,
Support
Oppose
Office Sought:
House
Senate
District: 00
State: ND
Calendar Year-To-Date
Per Election for Office Sought
738902.38
Disbursement For:
Primary
General
Other (specify)

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures 19000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 151986.30

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HACKER, NICHOLAS, ,

[Electronically Filed]

Date 10 / 31 / 2018

Signature

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

North Dakota Republican Party

Form A: BUZZ360 LLC. Transaction ID: SB21A.50001. Mailing Address: 1406 W LAKE #210, MINNEAPOLIS, MN 55408. Purpose: WEB SERVICE. Activity: ADMINISTRATIVE. Allocated Activity or Event: Administrative. Date: 11/04/2018. Total Amount: 350.00.

Form B: BRADY MARTZ & ASSOCIATES PC. Transaction ID: SB21A.50002. Mailing Address: PO BOX 1297, BISMARCK, ND 58502. Purpose: ACCOUNTING SERVICES. Activity: ADMINISTRATIVE. Allocated Activity or Event: Administrative. Date: 11/16/2018. Total Amount: 2379.13.

Form C: CMDI. Transaction ID: SB21A.50003. Mailing Address: 1593 SPRING HILL RD, STE 400, TYSONS CORNER, VA 22182. Purpose: DATABASE MANAGEMENT SVC. Activity: ADMINISTRATIVE. Allocated Activity or Event: Administrative. Date: 11/14/2018. Total Amount: 851.68.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 751.97, 2828.84, 3580.81.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

North Dakota Republican Party

Form A: CITY OF BISMARCK. Transaction ID: SB21A.50004. Mailing Address: PO BOX 5503. City: BISMARCK, ND, 58506. Purpose: UTILITIES. Activity: ADMINISTRATIVE. Date: 11/07/2018. Total Amount: 58.88.

Form B: CARDMEMBER SERVICES. Transaction ID: SB21A.50005. Mailing Address: PO BOX 790408. City: ST LOUIS, MO, 63179. Purpose: CREDIT CARD PAYMENT. Activity: ADMINISTRATIVE. Date: 11/16/2018. Total Amount: 51.00.

Form C: MICROSOFT. Transaction ID: SB21A.60000. Mailing Address: ONE MICROSOFT WAY. City: REDMOND, WA, 98052. Purpose: SUBSCRIPTION. Activity: ADMINISTRATIVE. Date: 11/16/2018. Total Amount: 51.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (23.07), NONFEDERAL SHARE (86.81), TOTAL AMOUNT (109.88).

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

North Dakota Republican Party

Form A: MARCO. Transaction ID: SB21A.50006. Mailing Address: PO BOX 660831. City: DALLAS, TX. Zip Code: 75266. Purpose: EQUIPMENT RENTAL. Activity: ADMINISTRATIVE. Date: 11/09/2018. Total Amount: 457.96.

Form B: MIDCONTINENT COMMUNICATIONS. Transaction ID: SB21A.50007. Mailing Address: PO BOC 5010. City: SIOUX FALLS, SD. Zip Code: 57117. Purpose: UTILITIES. Activity: ADMINISTRATIVE. Date: 10/19/2018. Total Amount: 338.19.

Form C: RIGHTSIDE COMPLIANCE LLC. Transaction ID: SB21A.50008. Mailing Address: PO BOX 341027. City: AUSTIN, TX. Zip Code: 78734. Purpose: COMPLIANCE CONSULTING. Activity: ADMINISTRATIVE. Date: 11/07/2018. Total Amount: 2091.93.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (606.50), NONFEDERAL SHARE (2281.58), TOTAL AMOUNT (2888.08).

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

North Dakota Republican Party

A. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.50009 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
RAMBOUGH, JANEAN, M, , Mailing Address 2103 ASSUMPTION DR			Allocated Activity or Event Year-To-Date 136505.95			
City BISMARCK	State ND	Zip Code 58501	Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: PAYROLL		<input type="text"/>	Allocated Activity or Event Year-To-Date 136505.95			
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="340.65"/>			<input type="text" value="1281.46"/>			<input type="text" value="1622.11"/>

B. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.50010 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
PAYCHEX Mailing Address 911 PANORAMA TRAIL S			Allocated Activity or Event Year-To-Date 137759.66			
City ROCHESTER	State NY	Zip Code 14625	Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: PAYROLL		<input type="text"/>	Allocated Activity or Event Year-To-Date 137759.66			
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="139.47"/>			<input type="text" value="524.65"/>			<input type="text" value="664.12"/>

C. Full Name (Last, First, Middle Initial) Transaction ID : SB21A.50011 <input type="checkbox"/> Memo Item			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
MONTANA-DAKOTA UTILITIES Mailing Address PO BOX 5600			Allocated Activity or Event Year-To-Date 136879.84			
City BISMARCK	State ND	Zip Code 58506	Date <input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2018"/>			
Purpose of Disbursement: UTILITIES		<input type="text"/>	Allocated Activity or Event Year-To-Date 136879.84			
Activity or Event Identifier: ADMINISTRATIVE			Date <input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2018"/>			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<input type="text" value="78.52"/>			<input type="text" value="295.37"/>			<input type="text" value="373.89"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="558.64"/>		<input type="text" value="2101.48"/>		<input type="text" value="2660.12"/>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

North Dakota Republican Party

Form A: REAL PROPERTIES SERVICES INC. Transaction ID: SB21A.50013. Includes fields for Mailing Address, City (MOREHEAD, MN), Zip Code (56561), Purpose (MAINTENANCE), Activity Identifier (ADMINISTRATIVE), and Allocated Activity or Event (Administrative). Total amount: 67.50.

Form B: MIDCONTINENT COMMUNICATIONS. Transaction ID: SB21A.50015. Includes fields for Mailing Address, City (SIOUX FALLS, SD), Zip Code (57117), Purpose (UTILITIES), Activity Identifier (ADMINISTRATIVE), and Allocated Activity or Event (Administrative). Total amount: 480.00.

Form C: RAMBOUGH, JANEAN, M, . Transaction ID: SB21A.50016. Includes fields for Mailing Address, City (BISMARCK, ND), Zip Code (58501), Purpose (PAYROLL), Activity Identifier (ADMINISTRATIVE), and Allocated Activity or Event (Administrative). Total amount: 1622.12.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 455.63, NONFEDERAL SHARE 1713.99, TOTAL AMOUNT 2169.62.

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

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

North Dakota Republican Party

Form A: Full Name (Last, First, Middle Initial) Transaction ID : SB21A.50017. Includes fields for Mailing Address (911 PANORAMA TRAIL S), City (ROCHESTER), State (NY), Zip Code (14625), Purpose of Disbursement (PAYROLL), Activity or Event Identifier (ADMINISTRATIVE), and Allocated Activity or Event (Administrative checked). Total amount: 664.12.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : SB21A.50018. Includes fields for Mailing Address (PO BOX 5010), City (SIOUX FALLS), State (SD), Zip Code (57117), Purpose of Disbursement (UTILITIES), Activity or Event Identifier (ADMINISTRATIVE), and Allocated Activity or Event (Administrative checked). Total amount: 332.53.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : SB21A.50019. Includes fields for Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, and Allocated Activity or Event. Total amount: 0.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (209.30), NONFEDERAL SHARE (787.35), TOTAL AMOUNT (996.65).

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

Table with 3 columns: FEDERAL SHARE (2605.11), NONFEDERAL SHARE (9800.05), TOTAL AMOUNT (12405.16).