



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**REPUBLICAN NATIONAL COMMITTEE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		9157658.57
(b) Cash on Hand at Beginning of Reporting Period.....	10025258.13	
(c) Total Receipts (from Line 19) .....	10196154.86	25168255.48
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	20221412.99	34325914.05
7. Total Disbursements (from Line 31).....	7902461.99	22006963.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	12318951.00	12318951.00
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	1225.20	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**REPUBLICAN NATIONAL COMMITTEE**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4203792.79	9756385.61
(ii) Unitemized .....	5013569.68	13293043.24
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	9217362.47	23049428.85
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	227500.00	447500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	9444862.47	23496928.85
12. Transfers From Affiliated/Other Party Committees.....	491020.43	980647.22
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).....	3621.96	27789.41
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	256650.00	662890.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	10196154.86	25168255.48
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	10196154.86	25168255.48

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	6868350.58	19428357.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6868350.58	19428357.07
22. Transfers to Affiliated/Other Party Committees.....	868925.31	2160064.44
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	5000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	5.55
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 .....	72455.00	93700.99
(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)).....	72455.00	93700.99
29. Other Disbursements .....	92731.10	319835.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7902461.99	22006963.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7902461.99	22006963.05

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	9444862.47	23496928.85
34. Total Contribution Refunds (from Line 28(d)) .....	72455.00	93700.99
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9372407.47	23403227.86
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6868350.58	19428357.07
37. Offsets to Operating Expenditures (from Line 15, page 3).....	3621.96	27789.41
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6864728.62	19400567.66

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

Regarding negative receipts listed on line 11(a)(i) with the description of 'ACH Return', these are interbank clearing of electronic payments processed by the Automated Clearing House (ACH) network of participating banks and the Federal Reserve. These are returns of contributions by individuals which have been deducted from our credit card merchant account or bank account by the credit card company or bank.

Form/Schedule: F3XN  
Transaction ID:

Regarding Best Effort Memos that indicate Occupation as 'Not Specified', these records are amended because we received a response to our request for completed donor information that did not include occupation information.

: 97 `A-G79 @05 B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

Concerning any donors shown for whom Occupation or Employer are not listed, the Republican National Committee has requested this information in the initial contribution solicitation and has made a second request in a separate mailing enclosing a self-addressed postage-paid envelope in compliance with the FEC's Best Efforts regulation 11cfr 104.7(b). The Republican National Committee will amend the report if any of the requested information is received.

Form/Schedule: F3XN  
Transaction ID:

Regarding 'Asset Sales' reported on Schedule A supporting Line 15 of our report, occasionally the RNC has used office equipment that we need to dispose of. This equipment may be sold in bulk to a commercial liquidation business or piece by piece to individuals. When this is done, these items are reported as 'asset sale' and the price charged is such that they in no way constitute a political contribution. The used assets liquidated by sale to individuals or businesses are reported as 'Asset Sale' and are priced at fair market value. These items sold by the RNC are not unique to our business, they are common items found in most business, such as computers and cell phones. As such, the market price for these items are determined by referring to internet auction sites or checking replacement values from retail sources.

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

With regard to the usual and normal charge for fees received from a federal candidate on Schedule A supporting Line 15, the RNC charges fair market value for services it provides. Prices are intended to recover the cost for providing the service. The services reported on this schedule for which the RNC received payment were not services of a nature which is unique to the RNC. Services of this type are common in the business community and as such, the RNC compares and sets the price charged to prices available from other commercial sources.

Form/Schedule: F3XN  
Transaction ID:

All expenditures listed for Advertising, Cable Services, Catering/Food & Beverage, Data Services, Mail Production, Media Services, Phone Services, Photography Services, Political Souvenirs, Printing Services, Promotional Materials, Research Services, Revenue Processing Services, Satellite Services, Survey Research, Telemarketing and Venue Rental are RNC operating costs. None of these expenditures are Candidate-specific. Further, no media-related expenditures listed on Line 21 are intended for or directed by a specific candidate; they are either generic overhead costs or RNC fundraising costs.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

Payments to another political committee disclosed on Schedule B supporting Line 21(b) are not contributions. They are payments for goods and services received at usual and normal rates. With regard to the usual and normal rates, we are assured the fee is a commercially reasonable rate because we regularly obtain similar products from a variety of sources both political and commercial.

Form/Schedule: F3XN  
Transaction ID:

The Committee has reviewed all reimbursements to individuals for travel and subsistence and confirms that no further itemization is required under any Commission regulations for these expenditures.

**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 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Gerald J. Allen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3040 Grand Bay Blvd.  
 Unit 236  
 City Longboat Key State FL Zip Code 34228-4400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 442.00

Date of Receipt 08 / 30 / 2012  
**Transaction ID : 2014M04L11BE0001**  
 Amount of Each Receipt this Period 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Clint L. Kahler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10101-7th Avenue S.E.  
 Apartment 512  
 City Everett State WA Zip Code 98208-4751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Politics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 165.00

Date of Receipt 09 / 05 / 2012  
**Transaction ID : 2014M04L11BE0002**  
 Amount of Each Receipt this Period 45.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mrs. Christa N. Donoghue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 3790  
 City Victoria State TX Zip Code 77903-3790  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 24 / 2013  
**Transaction ID : 2014M04L11BE0003**  
 Amount of Each Receipt this Period 101.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Dale E. Armstrong**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 783 Sand Dollar Drive  
 City Sanibel State FL Zip Code 33957-7003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 02 / 11 / 2014  
**Transaction ID : 2014M04L11BE00004**  
 Amount of Each Receipt this Period 275.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. George E. Axmear**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 812 Washington Street  
 City Malcom State IA Zip Code 50157-5055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self - Employed Occupation Liquid Waste Pumper  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 06 / 2014  
**Transaction ID : 2014M04L11BE00005**  
 Amount of Each Receipt this Period 500.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Sheldon Rabinowitz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 SW 51st Street  
 City Des Moines State IA Zip Code 50312-2139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 08 / 03 / 2012  
**Transaction ID : 2014M04L11BE00006**  
 Amount of Each Receipt this Period 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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: PAGE 12 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. David C. Martin Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4131 McCabe Avenue N.E.  
 City State Zip Code  
 Ada MI 49301-9737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 655.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 11 / 2012  
**Transaction ID : 2014M04L11BE0007**  
 Amount of Each Receipt this Period  
 110.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Murray S. Peyton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18 Scudder Court  
 City State Zip Code  
 Pennington NJ 08534-2325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 11 / 2014  
**Transaction ID : 2014M04L11BE0008**  
 Amount of Each Receipt this Period  
 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Ronald L. Tullis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1004 16Th Street  
 City State Zip Code  
 Abernathy TX 79311-2004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 680.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 25 / 2014  
**Transaction ID : 2014M04L11BE0009**  
 Amount of Each Receipt this Period  
 55.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 13 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Ms. Suzanne Kim**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18828 Ridgeback Court  
 City Leesburg State VA Zip Code 20176-8252  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2013  
**Transaction ID : 2014M04L11BE00010**  
 Amount of Each Receipt this Period  
 500.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Eric Gustavson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3657 Cross Creek Road  
 City Malibu State CA Zip Code 90265-4929  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Spendthrift Farm Occupation Owner/Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 16200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 20 / 2014  
**Transaction ID : 2014M04L11BE00011**  
 Amount of Each Receipt this Period  
 16200.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. John W. Eilers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3750 Grandin Road  
 City Cincinnati State OH Zip Code 45226-1734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Wood & Tamping, LLC Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2014  
**Transaction ID : 2014M04L11BE00012**  
 Amount of Each Receipt this Period  
 125.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. David L. Wiegand**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6139 Carmichael Street  
 City Fort Collins State CO Zip Code 80528-7082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Country Financial Occupation Financial Services  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **0.00**

Date of Receipt **10 / 30 / 2013**  
**Transaction ID : 2014M04L11BE00013**  
 Amount of Each Receipt this Period **85.00**  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Joseph E. Toups**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 396  
 City Basile State LA Zip Code 70515-0396  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Farmer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **220.00**

Date of Receipt **02 / 14 / 2014**  
**Transaction ID : 2014M04L11BE00014**  
 Amount of Each Receipt this Period **220.00**  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Stephen E. Zimberg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 347 N New River Drive East Apt. 1902  
 City Fort Lauderdale State FL Zip Code 33301-3162  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Cleveland Clinic Florida Occupation Physician  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **0.00**

Date of Receipt **07 / 27 / 2012**  
**Transaction ID : 2014M04L11BE00015**  
 Amount of Each Receipt this Period **250.00**  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 15 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Julaine Moore**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 53 Robertson Road  
 City Pueblo State CO Zip Code 81001-1750  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 10 / 23 / 2012  
**Transaction ID : 2014M04L11BE00016**  
 Amount of Each Receipt this Period  
 50.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Dr. David Buttross**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 827 Theriot Road  
 City Lake Charles State LA Zip Code 70611-6115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 10 / 09 / 2012  
**Transaction ID : 2014M04L11BE00017**  
 Amount of Each Receipt this Period  
 1000.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Andy Trogot**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8560 Apple Blossom Lane  
 City Flushing State MI Zip Code 48433-2904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 01 / 18 / 2012  
**Transaction ID : 2014M04L11BE00018**  
 Amount of Each Receipt this Period  
 220.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

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

FOR LINE NUMBER: PAGE 16 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. Mr. Gus Benavides**

Mailing Address 281 River Cove Road

City Huntsville      State AL      Zip Code 35811-8010

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

Name of Employer Wyle, Inc.      Occupation Manager/Engineer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2012  
**Transaction ID : 2014M04L11BE00019**

Amount of Each Receipt this Period  
 200.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**B. Mrs. Jane Fogarty**

Mailing Address 450 Mudd Creek Road

City Inman      State SC      Zip Code 29349-8175

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

Name of Employer Homemaker      Occupation Homemaker

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2014  
**Transaction ID : 2014M04L11BE00020**

Amount of Each Receipt this Period  
 100.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**C. Mr. Tommy Morrison**

Mailing Address 6022 Chapel Falls Lane

City Fulshear      State TX      Zip Code 77441-1142

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

Name of Employer Shell Oil Co.      Occupation Wells Operation Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 24 / 2014  
**Transaction ID : 2014M04L11BE00021**

Amount of Each Receipt this Period  
 250.00

**[MEMO ITEM]**  
Best effort update of individual information

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Michael T. Newman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7117 14th Avenue  
 City Kenosha State WI Zip Code 53143-5447  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2012  
**Transaction ID : 2014M04L11BE00022**  
 Amount of Each Receipt this Period 200.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mrs. Ruth T. Heath**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9160 East Wethersfield Road  
 City Scottsdale State AZ Zip Code 85260-5052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 07 / 10 / 2012  
**Transaction ID : 2014M04L11BE00023**  
 Amount of Each Receipt this Period 150.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Pearson Cummin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22 Baldwin Farms S.  
 City Greenwich State CT Zip Code 06831-3309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Gray Fox Associates, Inc. Occupation Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 30 / 2014  
**Transaction ID : 2014M04L11BE00024**  
 Amount of Each Receipt this Period 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. Ms. Sue C. Stewart**

Mailing Address P.O. Box 270463

City State Zip Code  
Dallas TX 75227-0463

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

Name of Employer Occupation  
Self-Employed Real Estate Reator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2013  
**Transaction ID : 2014M04L11BE00025**

Amount of Each Receipt this Period  
110.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**B. Mrs. Julie N. Jenkyn**

Mailing Address 6803 De Paul Cove

City State Zip Code  
Austin TX 78723-2223

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 10 / 2014  
**Transaction ID : 2014M04L11BE00026**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**C. Mr. Hubert E. Harvey**

Mailing Address 5100 John D. Ryan Blvd.  
Apartment 2605

City State Zip Code  
San Antonio TX 78245-3521

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
85.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 26 / 2013  
**Transaction ID : 2014M04L11BE00027**

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 19 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. John England**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 212

City State Zip Code  
Knoxville IL 61448-0212

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 26 / 2013  
**Transaction ID : 2014M04L11BE00028**

Amount of Each Receipt this Period  
 65.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Clovis R. Hassler**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 147

City State Zip Code  
Verdi NV 89439-0147

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 04 / 2014  
**Transaction ID : 2014M04L11BE00029**

Amount of Each Receipt this Period  
 225.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mrs. Susan H. Theobald**  
Full Name (Last, First, Middle Initial)

Mailing Address 1803 Creekside Drive

City State Zip Code  
Clarksville IN 47129-9029

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

Name of Employer Occupation  
Jefferson Community & Technical Colleg Registered Nurse

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 07 / 2012  
**Transaction ID : 2014M04L11BE00030**

Amount of Each Receipt this Period  
 100.00

**[MEMO ITEM]**  
Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Ms. Alice P. Melly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 Sound Shore Drive  
 Unit 4  
 City Greenwich State CT Zip Code 06830-7252  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2013  
**Transaction ID : 2014M04L11BE00031**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. John Tassilo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 151 Prospect Avenue  
 Apartment 6E1  
 City Hackensack State NJ Zip Code 07601-2293  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 18 / 2014  
**Transaction ID : 2014M04L11BE00032**  
 Amount of Each Receipt this Period  
 200.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Dr. Isaiah Fidler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4899 Montrose Blvd.  
 Apartment 1113  
 City Houston State TX Zip Code 77006-6168  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer M.D. Anderson Cancer Center Occupation Oncologist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 20 / 2014  
**Transaction ID : 2014M04L11BE00033**  
 Amount of Each Receipt this Period  
 50.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Mark S. Filowitz**  
Full Name (Last, First, Middle Initial)

Mailing Address 2736 Anacapa Place

City Fullerton State CA Zip Code 92835-2413

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

Name of Employer Cal State Fullerton Occupation Educator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
110.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 10 / 2014  
**Transaction ID : 2014M04L11BE00034**

Amount of Each Receipt this Period  
 110.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Gerald Himes**  
Full Name (Last, First, Middle Initial)

Mailing Address 10935 S. 77Th East Place

City Tulsa State OK Zip Code 74133-4876

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2012  
**Transaction ID : 2014M04L11BE00035**

Amount of Each Receipt this Period  
 125.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mr. Laurence William Murray**  
Full Name (Last, First, Middle Initial)

Mailing Address 1894 15Th Avenue

City San Francisco State CA Zip Code 94122-4536

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 11 / 2012  
**Transaction ID : 2014M04L11BE00036**

Amount of Each Receipt this Period  
 100.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 22 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Ms. Diana Fuchs**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3235 Maroneal Street

City Houston	State TX	Zip Code 77025-2020
-----------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

**Transaction ID : 2014M04L11BE00037**

Amount of Each Receipt this Period  

105.00
--------

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Gary L. Hillberry**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5372 S. Holland Street

City Littleton	State CO	Zip Code 80123-7433
-------------------	-------------	------------------------

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

Name of Employer X. L. A.	Occupation Consultant
------------------------------	--------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2012

**Transaction ID : 2014M04L11BE00038**

Amount of Each Receipt this Period  

100.00
--------

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mr. Thomas Drought**  
Full Name (Last, First, Middle Initial)  
Mailing Address 112 E. Pecan Street  
Suite 2750

City San Antonio	State TX	Zip Code 78205-1557
---------------------	-------------	------------------------

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

Name of Employer Self - Employed	Occupation Lawyer
-------------------------------------	----------------------

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
01	/	16	/	2014

**Transaction ID : 2014M04L11BE00039**

Amount of Each Receipt this Period  

220.00
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**[MEMO ITEM]**  
Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Michael L. Czajka**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 530 W. Long Lake Road  
 City Bloomfield State MI Zip Code 48302-1544  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 55.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 13 / 2014  
**Transaction ID : 2014M04L11BE00040**  
 Amount of Each Receipt this Period  
 55.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Hari P. Garg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 745 N.W. 6th Avenue  
 City Canby State OR Zip Code 97013-3301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2012  
**Transaction ID : 2014M04L11BE00041**  
 Amount of Each Receipt this Period  
 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mrs. Gwen McCullough**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 1700  
 City Broken Arrow State OK Zip Code 74013-1700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 10 / 2014  
**Transaction ID : 2014M04L11BE00042**  
 Amount of Each Receipt this Period  
 220.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Ms. Mary P. Walters**  
Full Name (Last, First, Middle Initial)

Mailing Address 5761 Grackle Lane

City Westerville State OH Zip Code 43081-8674

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 13 / 2013  
**Transaction ID : 2014M04L11BE00043**

Amount of Each Receipt this Period  
 100.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Howard Weinberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 2109 Via Rivera

City Palos Verdes Estates State CA Zip Code 90274-2723

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

Name of Employer Self-Employed Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2013  
**Transaction ID : 2014M04L11BE00044**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mr. Jorge Luis Del Rosal**  
Full Name (Last, First, Middle Initial)

Mailing Address 9400 Old Cutler Ln

City Coral Gables State FL Zip Code 33156-2243

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 23 / 2012  
**Transaction ID : 2014M04L11BE00045**

Amount of Each Receipt this Period  
 1000.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 25 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Daniel Woods**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 811 Country Club Drive  
 City Gasburg State VA Zip Code 23857-2219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Dominion Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2014  
**Transaction ID : 2014M04L11BE00046**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Charles D. Carter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9436 Misty Grove Cove  
 City Cordova State TN Zip Code 38016-4702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Mid - South Marketing Systems Occupation General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 07 / 2014  
**Transaction ID : 2014M04L11BE00047**  
 Amount of Each Receipt this Period  
 220.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Owen C. Peck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1905 Currant Court  
 City Gardnerville State NV Zip Code 89410-6664  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2013  
**Transaction ID : 2014M04L11BE00048**  
 Amount of Each Receipt this Period  
 200.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Thomas G. Morris**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 20570

City Oklahoma City State OK Zip Code 73156-0570

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

Name of Employer Self - Employed Occupation Shopping Center Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
02 / 20 / 2014  
Transaction ID : 2014M04L11BE00049

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Larry Keefe**  
Full Name (Last, First, Middle Initial)

Mailing Address 704 W. Central Road

City Mount Prospect State IL Zip Code 60056-2339

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

Name of Employer L.J. Keefe Co. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
02 / 25 / 2014  
Transaction ID : 2014M04L11BE00050

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mrs. Anne Wiseman**  
Full Name (Last, First, Middle Initial)

Mailing Address 475 Galloway Road

City Lowden State WA Zip Code 99360-5006

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
10 / 03 / 2012  
Transaction ID : 2014M04L11BE00051

Amount of Each Receipt this Period  
1.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 27 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Murray D. Provine**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 450 Rome Beauty Lane  
 City State Zip Code  
 Clarkesville GA 30523-8402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 P.C. Farms, LLC Owner  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2012  
**Transaction ID : 2014M04L11BE00052**  
 Amount of Each Receipt this Period  
 240.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mrs. Willene Boger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 404 Lomax Cove  
 City State Zip Code  
 Austin TX 78732-2482  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 20 / 2014  
**Transaction ID : 2014M04L11BE00053**  
 Amount of Each Receipt this Period  
 1000.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mrs. Cathy A. Parker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30756 Cypress Lane  
 City State Zip Code  
 Laurel DE 19956-3514  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Nanticoke Health Services Registered Nurse  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 05 / 2012  
**Transaction ID : 2014M04L11BE00054**  
 Amount of Each Receipt this Period  
 110.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Virginia Nehring**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 213 Beacon Landing  
 City Tinton Falls State NJ Zip Code 07753-7752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 03 / 2014  
**Transaction ID : 2014M04L11BE00055**  
 Amount of Each Receipt this Period  
 235.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Ms. Marcia B. Finley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18570 Martinique Court  
 City Villa Park State CA Zip Code 92861-3122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2012  
**Transaction ID : 2014M04L11BE00056**  
 Amount of Each Receipt this Period  
 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. George Laverne Roderick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6616 Silver Springs Court  
 City Citrus Heights State CA Zip Code 95621-3548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 12 / 2013  
**Transaction ID : 2014M04L11BE00057**  
 Amount of Each Receipt this Period  
 30.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Michael D. Little**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 152 Union Avenue  
 City Centralia State WA Zip Code 98531-9411  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Permacold Engineering Occupation Refridgeration Technician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 10 / 2014  
**Transaction ID : 2014M04L11BE00058**  
 Amount of Each Receipt this Period  
 25.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mrs. Arminta Campbell Burks**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16122 Forecastle Street  
 City Crosby State TX Zip Code 77532-5550  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 31 / 2014  
**Transaction ID : 2014M04L11BE00059**  
 Amount of Each Receipt this Period  
 120.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Ms. Elizabeth R. O'Brien**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1620 Mayflower Court Apartment A106  
 City Winter Park State FL Zip Code 32792-2573  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 130.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2014  
**Transaction ID : 2014M04L11BE00060**  
 Amount of Each Receipt this Period  
 130.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. Mrs. Emily Longuiera**

Mailing Address 16441 F.M. 624

City Robstown State TX Zip Code 78380-6046

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

Name of Employer Self - Employed Occupation Business Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2014  
**Transaction ID : 2014M04L11BE00061**

Amount of Each Receipt this Period  
 225.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**B. Mr. L. Brooks Patterson**

Mailing Address 5574 Northcrest Village Trail

City Clarkston State MI Zip Code 48346-2797

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

Name of Employer Oakland County Government Occupation County Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : 2014M04L11BE00062**

Amount of Each Receipt this Period  
 200.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**C. Mrs. Jackie H. Bridgeman**

Mailing Address 3415 Cross Creek Road

City Malibu State CA Zip Code 90265-4927

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 06 / 2012  
**Transaction ID : 2014M04L11BE00063**

Amount of Each Receipt this Period  
 1100.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Ms. Nancy K. McCarty**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 212 Galvin Drive  
 City Seguin State TX Zip Code 78155-7118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 55.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2012  
**Transaction ID : 2014M04L11BE00064**  
 Amount of Each Receipt this Period  
 40.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Terry Jaros**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24144 Robinwood Street  
 City Leesburg State FL Zip Code 34748-7896  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 12 / 2014  
**Transaction ID : 2014M04L11BE00065**  
 Amount of Each Receipt this Period  
 220.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Clovis Burch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 6119  
 City Shreveport State LA Zip Code 71136-6119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Pharmacist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 29 / 2012  
**Transaction ID : 2014M04L11BE00066**  
 Amount of Each Receipt this Period  
 101.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Ms. Marie T. Holdbrooks**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 506 County Road 93  
 City State Zip Code  
 Haleyville AL 35565-7247  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 04 / 2012  
**Transaction ID : 2014M04L11BE00067**  
 Amount of Each Receipt this Period  
 55.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. David R. Proctor**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3505 Turtle Creek Blvd.  
 Apartment 9A  
 City State Zip Code  
 Dallas TX 75219-5568  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 05 / 2014  
**Transaction ID : 2014M04L11BE00068**  
 Amount of Each Receipt this Period  
 500.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Rodney P. Chambers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3015 Johnstonville Road  
 City State Zip Code  
 Susanville CA 96130-8739  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Sierra Broadcasting Corp. Broadcasting  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2012  
**Transaction ID : 2014M04L11BE00069**  
 Amount of Each Receipt this Period  
 300.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Susan A. Rockwell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 6027  
 City Schenectady State NY Zip Code 12301-6027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 04 / 11 / 2013  
**Transaction ID : 2014M04L11BE00070**  
 Amount of Each Receipt this Period 220.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. John W. Nelson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5305 77Th Street  
 City Lubbock State TX Zip Code 79424-2501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 10 / 05 / 2012  
**Transaction ID : 2014M04L11BE00071**  
 Amount of Each Receipt this Period 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mrs. Phyllis Lepri**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11928 Richland Lane  
 City Herndon State VA Zip Code 20171-1516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 10 / 15 / 2013  
**Transaction ID : 2014M04L11BE00072**  
 Amount of Each Receipt this Period 25.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Nancy Eppard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1685 Cherokee Lane  
 City Wickenburg State AZ Zip Code 85390-1464  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 24 / 2014  
**Transaction ID : 2014M04L11BE00073**  
 Amount of Each Receipt this Period 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Vernon O. Paulson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 51 Ivy Hill Road  
 City Red Bank State NJ Zip Code 07701-5121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 06 / 2014  
**Transaction ID : 2014M04L11BE00074**  
 Amount of Each Receipt this Period 300.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. William Mannlein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1833 Ivy Pointe Court  
 City Naples State FL Zip Code 34109-3378  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 01 / 10 / 2012  
**Transaction ID : 2014M04L11BE00075**  
 Amount of Each Receipt this Period 110.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 35 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Laurel Belden**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2921 Howard Road

City Madera	State CA	Zip Code 93637-5924
----------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2012

**Transaction ID : 2014M04L11BE00076**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mrs. Patricia Charles**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1632 Canterbury Drive

City Elkhart	State IN	Zip Code 46514-4164
-----------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2014

**Transaction ID : 2014M04L11BE00077**

Amount of Each Receipt this Period  
200.00

**[MEMO ITEM]**  
Best effort update of individual information

**c. Mr. George Knapp Jr.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3 Kingston Manor Drive

City Saint Louis	State MO	Zip Code 63124-1913
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
110.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2013

**Transaction ID : 2014M04L11BE00078**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Fern McMunn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1397 W. Horton Road  
 City Jasper State MI Zip Code 49248-9760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 03 / 2014  
**Transaction ID : 2014M04L11BE00079**  
 Amount of Each Receipt this Period 300.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Alvin Streder**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5267 Spicewood Lane  
 City Frisco State TX Zip Code 75034-5100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 18 / 2012  
**Transaction ID : 2014M04L11BE00080**  
 Amount of Each Receipt this Period 220.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Nole Walters**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22268 Lake Street  
 City Cassopolis State MI Zip Code 49031-9392  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 19 / 2014  
**Transaction ID : 2014M04L11BE00081**  
 Amount of Each Receipt this Period 300.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 37 OF 2949
	<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	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Alfred M. Clark Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 1030  
 City State Zip Code  
 Carpinteria CA 93014-1030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 29 / 2012  
**Transaction ID : 2014M04L11BE00082**  
 Amount of Each Receipt this Period  
 1000.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. William Hawkins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5597 Fair Cove  
 City State Zip Code  
 Memphis TN 38115-2316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : 2014M04L11BE00083**  
 Amount of Each Receipt this Period  
 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mrs. Virginia T. Walther**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6206 N. Kirkwood Avenue  
 City State Zip Code  
 Chicago IL 60646-5026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 31 / 2012  
**Transaction ID : 2014M04L11BE00084**  
 Amount of Each Receipt this Period  
 1000.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Dr. Glen Burmeister**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 342 Tamasoa Place  
 City Castle Rock State CO Zip Code 80108-9028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation 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  
 02 / 04 / 2014  
**Transaction ID : 2014M04L11BE00085**  
 Amount of Each Receipt this Period  
 500.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mrs. Jack W. Gottschalk**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7195 Given Road  
 City Cincinnati State OH Zip Code 45243-2835  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2012  
**Transaction ID : 2014M04L11BE00086**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Donald Duff**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 205 Tawney Eagle Court  
 City Huntertown State IN Zip Code 46748-9272  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2012  
**Transaction ID : 2014M04L11BE00087**  
 Amount of Each Receipt this Period  
 150.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Stanley Berry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1011 Tulip Street  
 City Longmont State CO Zip Code 80501-4121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 02 / 19 / 2014  
**Transaction ID : 2014M04L11BE00088**  
 Amount of Each Receipt this Period 220.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Dominic Frederico**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 Knowles Creek Road  
 City New Hope State PA Zip Code 18938-9250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Assured Guaranty Ltd. Occupation Insurance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 27 / 2014  
**Transaction ID : 2014M04L11BE00089**  
 Amount of Each Receipt this Period 300.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Robert A. Brooks**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1285 County Road 2  
 City Greene State NY Zip Code 13778-2252  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 02 / 26 / 2014  
**Transaction ID : 2014M04L11BE00090**  
 Amount of Each Receipt this Period 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 40 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Janet McBride**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17001 Searstone Drive  
 Apartment 311  
 City Cary State NC Zip Code 27513-8389  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 08 / 22 / 2012  
**Transaction ID : 2014M04L11BE00091**  
 Amount of Each Receipt this Period 200.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mrs. Donna Plunkett**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6018 Summer Road  
 City Alexandria State VA Zip Code 22310-1855  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 14 / 2012  
**Transaction ID : 2014M04L11BE00092**  
 Amount of Each Receipt this Period 62.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Timothy T. Cojocar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 E. Park Road  
 City Newtown State PA Zip Code 18940-1194  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Njonas Occupation Maintenance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 07 / 05 / 2012  
**Transaction ID : 2014M04L11BE00093**  
 Amount of Each Receipt this Period 30.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 41 OF 2949
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Donnie Wilson**  
Full Name (Last, First, Middle Initial)

Mailing Address 6002 County Road 115

City Brownwood	State TX	Zip Code 76801-8423
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self - Employed	Occupation Rancher
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

**Transaction ID : 2014M04L11BE00094**

Amount of Each Receipt this Period  

300.00
--------

**[MEMO ITEM]**  
Best effort update of individual information

**B. Ms. Macie Mc Reynolds Clapp**  
Full Name (Last, First, Middle Initial)

Mailing Address 2118 Antibes Drive

City Carrollton	State TX	Zip Code 75006-4326
--------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2012

**Transaction ID : 2014M04L11BE00095**

Amount of Each Receipt this Period  

100.00
--------

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mrs. Edna H. Spencer**  
Full Name (Last, First, Middle Initial)

Mailing Address 3901 Crest Drive

City Manhattan Beach	State CA	Zip Code 90266-3122
-------------------------	-------------	------------------------

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

Name of Employer None	Occupation 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
02	/	03	/	2014

**Transaction ID : 2014M04L11BE00096**

Amount of Each Receipt this Period  

500.00
--------

**[MEMO ITEM]**  
Best effort update of individual information

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

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

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

FOR LINE NUMBER: PAGE 42 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. Ms. Barbara Jean Luglan**

Mailing Address 815 Islebay Drive

City Apollo Beach State FL Zip Code 33572-3381

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2013  
**Transaction ID : 2014M04L11BE00097**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**B. Mrs. Magda Dancovich**

Mailing Address 35170 Cabrillo Drive

City Fremont State CA Zip Code 94536-4560

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

Name of Employer Ultrasil Corporation Occupation Controller

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2012  
**Transaction ID : 2014M04L11BE00098**

Amount of Each Receipt this Period  
110.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**C. Mr. William Akers**

Mailing Address 3305 Scarborough Lane Court

City Colleyville State TX Zip Code 76034-4901

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 18 / 2013  
**Transaction ID : 2014M04L11BE00099**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 43 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Jack W. Schindler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16282 Road 20  
 City Fort Jennings State OH Zip Code 45844-9700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 195.00

Date of Receipt 06 / 29 / 2012  
**Transaction ID : 2014M04L11BE00100**  
 Amount of Each Receipt this Period 70.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Ms. Gloria Joy Crandall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 236  
 City Bay Pines State FL Zip Code 33744-0236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 11 / 22 / 2013  
**Transaction ID : 2014M04L11BE00101**  
 Amount of Each Receipt this Period 120.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mrs. Carole L. Leininger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1014 Sherry Drive  
 City Riverton State WY Zip Code 82501-2419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 08 / 28 / 2012  
**Transaction ID : 2014M04L11BE00102**  
 Amount of Each Receipt this Period 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Marvin Leonard Williams**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1551 6th Avenue Drive  
 Lot 53  
 City Kingsburg State CA Zip Code 93631-1731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self - Employed Occupation Farmer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt **02 / 12 / 2014**  
**Transaction ID : 2014M04L11BE00103**  
 Amount of Each Receipt this Period **120.00**  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mrs. Judith Curran**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 Green Ridge Road  
 City Voorhees State NJ Zip Code 08043-1255  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **0.00**

Date of Receipt **05 / 25 / 2012**  
**Transaction ID : 2014M04L11BE00104**  
 Amount of Each Receipt this Period **110.00**  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mrs. Gerry A. Dunlap**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 802 Park Avenue  
 City Milford State NE Zip Code 68405-9792  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **240.00**

Date of Receipt **01 / 23 / 2012**  
**Transaction ID : 2014M04L11BE00105**  
 Amount of Each Receipt this Period **240.00**  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 45 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. John H. Field**  
Full Name (Last, First, Middle Initial)

Mailing Address 317 Goshen Road

City Litchfield State CT Zip Code 06759-2404

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
01 / 27 / 2012  
Transaction ID : 2014M04L11BE00106

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Ms. Candace Loraine Hoback**  
Full Name (Last, First, Middle Initial)

Mailing Address 4221 John Court

City Flower Mound State TX Zip Code 75028-1142

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

Name of Employer U.S.M.D. Occupation Nurse

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 90.00

Date of Receipt  
08 / 15 / 2012  
Transaction ID : 2014M04L11BE00107

Amount of Each Receipt this Period  
25.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Ms. Susan J. Floyd**  
Full Name (Last, First, Middle Initial)

Mailing Address 325 Sugarland Run Drive

City Sterling State VA Zip Code 20164-1232

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

Name of Employer CMDI Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
06 / 26 / 2012  
Transaction ID : 2014M04L11BE00108

Amount of Each Receipt this Period  
1.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 46 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. Patrick Quinn**

Mailing Address 9273 Amber Wood Dr

City Willoughby	State OH	Zip Code 44094-9351
--------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012  
**Transaction ID : 2014M04L11BE00109**

Amount of Each Receipt this Period  
 100.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**B. Mr. George Williams**

Mailing Address 2441 Briarwood Drive

City Boulder	State CO	Zip Code 80305-6801
-----------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2013  
**Transaction ID : 2014M04L11BE00110**

Amount of Each Receipt this Period  
 200.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**C. Mr. Kristian Erik Grimland**

Mailing Address 650 Silver Spur Drive

City Weatherford	State TX	Zip Code 76087-6483
---------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2012  
**Transaction ID : 2014M04L11BE00111**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**  
Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Robert C. Hazard Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2035 Birnam Wood Drive  
 City Montecito State CA Zip Code 93108-2205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 28 / 2012  
**Transaction ID : 2014M04L11BE00112**  
 Amount of Each Receipt this Period 5000.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Glen Dell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3524 Se Fairway E.  
 City Stuart State FL Zip Code 34997-6114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 07 / 2014  
**Transaction ID : 2014M04L11BE00113**  
 Amount of Each Receipt this Period 300.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Teddy Lynn Strobehn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9082 Highgrove Court  
 City Grand Blanc State MI Zip Code 48439-9448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Boehle Chemicals Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 10 / 19 / 2012  
**Transaction ID : 2014M04L11BE00114**  
 Amount of Each Receipt this Period 300.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 48 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Ms. Adela Fernandez**  
Full Name (Last, First, Middle Initial)

Mailing Address 5334 Alton Road

City Miami Beach State FL Zip Code 33140-2015

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 11 / 2014  
**Transaction ID : 2014M04L11BE00115**

Amount of Each Receipt this Period  
 100.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Roberto Otanez**  
Full Name (Last, First, Middle Initial)

Mailing Address 14514 Redwood Bend Trail

City Houston State TX Zip Code 77062-2154

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

Name of Employer Superior International, Llc Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2012  
**Transaction ID : 2014M04L11BE00116**

Amount of Each Receipt this Period  
 100.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mr. Mike Burdian**  
Full Name (Last, First, Middle Initial)

Mailing Address 4229 Alesbury Dr

City Jacksonville State FL Zip Code 32224

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

Name of Employer Retired Occupation Realtor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2012  
**Transaction ID : 2014M04L11BE00117**

Amount of Each Receipt this Period  
 100.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 49 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Ms. Dianne Pulse**  
Full Name (Last, First, Middle Initial)  
Mailing Address 31 County Road 215

City Walnut	State MS	Zip Code 38683-9794
----------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Legal
-----------------------------------	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2013

**Transaction ID : 2014M04L11BE00118**

Amount of Each Receipt this Period  

000	.	00
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**50.00**

**[MEMO ITEM]**  
Best effort update of individual information

**B. Miss Lolita Bequiso Ocampo**  
Full Name (Last, First, Middle Initial)  
Mailing Address 13342 Ramona Parkway

City Baldwin Park	State CA	Zip Code 91706-3838
----------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2012

**Transaction ID : 2014M04L11BE00119**

Amount of Each Receipt this Period  

000	.	00
-----	---	----

**101.00**

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mr. Bryan Phillips**  
Full Name (Last, First, Middle Initial)  
Mailing Address 213 Aspen Street

City Alva	State OK	Zip Code 73717-3350
--------------	-------------	------------------------

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

Name of Employer Self - Employed	Occupation Farmer
-------------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2012

**Transaction ID : 2014M04L11BE00120**

Amount of Each Receipt this Period  

000	.	00
-----	---	----

**200.00**

**[MEMO ITEM]**  
Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Gordon Edward Wheatley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2313 Beach Haven Drive  
 Apartment 301  
 City Virginia Beach State VA Zip Code 23451-1263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 25 / 2014  
**Transaction ID : 2014M04L11BE00121**  
 Amount of Each Receipt this Period  
 115.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Ms. Sandy Laughlin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 769  
 City Pebble Beach State CA Zip Code 93953-0769  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation 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  
 11 / 20 / 2013  
**Transaction ID : 2014M04L11BE00122**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**c. Mrs. Carolyn Koenig**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 207  
 City Randall State MN Zip Code 56475-0207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 03 / 2014  
**Transaction ID : 2014M04L11BE00123**  
 Amount of Each Receipt this Period  
 125.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Xiao M. Li**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5008 S 215 St  
 City Kent State WA Zip Code 98032-8496  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer China First Restaurant Occupation Restaraunt Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 01 / 17 / 2014  
**Transaction ID : 2014M04L11BE00124**  
 Amount of Each Receipt this Period 275.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Harold T. Ozburn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 591 Hodges Circle  
 City Mansfield State GA Zip Code 30055-2801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Contractor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 10 / 19 / 2012  
**Transaction ID : 2014M04L11BE00125**  
 Amount of Each Receipt this Period 300.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Jay Mickelson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 89788 State Highway 86  
 City Windom State MN Zip Code 56101-4195  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self - Employed Occupation Farmer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 07 / 2013  
**Transaction ID : 2014M04L11BE00126**  
 Amount of Each Receipt this Period 220.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 52 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Rebecca Cutshaw**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 127  
 City State Zip Code  
 Greenville TN 37744-0127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed Attorney  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 21 / 2012  
**Transaction ID : 2014M04L11BE00127**  
 Amount of Each Receipt this Period  
 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mrs. Patricia Aycook**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13765 Iowa Drive  
 City State Zip Code  
 Warren MI 48088-3248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 120.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 24 / 2012  
**Transaction ID : 2014M04L11BE00128**  
 Amount of Each Receipt this Period  
 106.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. William Mason Wright III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 S. Arlington Ridge Road  
 Apartment 915  
 City State Zip Code  
 Arlington VA 22202-1928  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2012  
**Transaction ID : 2014M04L11BE00129**  
 Amount of Each Receipt this Period  
 225.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. John J. Teller**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 802  
 City Rancho Murieta State CA Zip Code 95683-0802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Maxim Crane Occupation Crane Operator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 02 / 2013  
**Transaction ID : 2014M04L11BE00130**  
 Amount of Each Receipt this Period  
 55.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mrs. Jeselyn Basler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5194 Atwater Court  
 City Kalamazoo State MI Zip Code 49009-8986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 06 / 2012  
**Transaction ID : 2014M04L11BE00131**  
 Amount of Each Receipt this Period  
 200.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Robert Nordhus**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 N. Smith Street #25  
 City Clark State SD Zip Code 57225-1120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 05 / 2012  
**Transaction ID : 2014M04L11BE00132**  
 Amount of Each Receipt this Period  
 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 54 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Ronald Westervelt**  
Full Name (Last, First, Middle Initial)

Mailing Address 4928 Viejo Ct.

City Granbury State TX Zip Code 76049-7103

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

Name of Employer Retired Occupation Civil Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 15 / 2012  
Transaction ID : 2014M04L11BE00133

Amount of Each Receipt this Period 100.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Todd Weidenbaker**  
Full Name (Last, First, Middle Initial)

Mailing Address 5023 Stanford Avenue

City Dallas State TX Zip Code 75209-3319

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

Name of Employer Self Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 17 / 2012  
Transaction ID : 2014M04L11BE00134

Amount of Each Receipt this Period 110.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Ms. Anjali Morris**  
Full Name (Last, First, Middle Initial)

Mailing Address 31 Harbor View Drive

City Richmond State CA Zip Code 94804-7496

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 05 / 2012  
Transaction ID : 2014M04L11BE00135

Amount of Each Receipt this Period 250.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 55 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Luke Ralph Jacobellis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17201 Gresham Street  
 City Northridge State CA Zip Code 91325-3207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer John Paul Mitchell Systems Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2012  
**Transaction ID : 2014M04L11BE00136**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Dale W. Blose**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6019 Boyden Knoll Drive  
 City Katy State TX Zip Code 77494-0380  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2012  
**Transaction ID : 2014M04L11BE00137**  
 Amount of Each Receipt this Period  
 75.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. John Mizuki**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 Ridge Crest Circle  
 City Pomona State CA Zip Code 91766-4914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 23 / 2012  
**Transaction ID : 2014M04L11BE00138**  
 Amount of Each Receipt this Period  
 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Helen B. Breck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box Ak  
 City Carmel State CA Zip Code 93921-1537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 11 / 2014  
**Transaction ID : 2014M04L11BE00139**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mrs. Suzanne G. Bellis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 248 Cedar Road  
 City Poquoson State VA Zip Code 23662-2112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 07 / 2012  
**Transaction ID : 2014M04L11BE00140**  
 Amount of Each Receipt this Period  
 200.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Jacob Brouwer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 121 Freesia Gln  
 City Escondido State CA Zip Code 92026-1351  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation 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  
 02 / 11 / 2014  
**Transaction ID : 2014M04L11BE00141**  
 Amount of Each Receipt this Period  
 500.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. Fredrick James Gierke</b>		Date of Receipt MM / DD / YYYY 06 / 25 / 2012 <b>Transaction ID : 2014M04L11BE00142</b>
Mailing Address 265 Delta Waters Street		Amount of Each Receipt this Period 500.00
City Henderson	State NV	Zip Code 89074-8711
FEC ID number of contributing federal political committee. C		
Name of Employer Clark County S.D.	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	<b>[MEMO ITEM]</b> Best effort update of individual information

Full Name (Last, First, Middle Initial) <b>B. Mr. Norman P. Hagemeyer</b>		Date of Receipt MM / DD / YYYY 06 / 26 / 2012 <b>Transaction ID : 2014M04L11BE00143</b>
Mailing Address 4649 Old Hickory Trail		Amount of Each Receipt this Period 250.00
City Arlington	State TN	Zip Code 38002-3931
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	<b>[MEMO ITEM]</b> Best effort update of individual information

Full Name (Last, First, Middle Initial) <b>C. Mrs. Phyllis Joyce Edwards</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2012 <b>Transaction ID : 2014M04L11BE00144</b>
Mailing Address 3309 E. Cane Drive		Amount of Each Receipt this Period 63.00
City Kingman	State AZ	Zip Code 86409-8459
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	<b>[MEMO ITEM]</b> Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Ms. Carolyn M. Schaefer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8000 Sycamore Road  
 City Indianapolis State IN Zip Code 46240-2543  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 08 / 22 / 2012  
**Transaction ID : 2014M04L11BE00145**  
 Amount of Each Receipt this Period 500.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Ms. Shelby Travis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 208 E. 28th Street Aptment 2G  
 City New York State NY Zip Code 10016-8568  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 26 / 2012  
**Transaction ID : 2014M04L11BE00146**  
 Amount of Each Receipt this Period 200.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mrs. Mary H. Tollenaere**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 988 Golden Aspen Place  
 City Ashland State OR Zip Code 97520-9128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 09 / 2012  
**Transaction ID : 2014M04L11BE00147**  
 Amount of Each Receipt this Period 300.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 59 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Sylvia Hill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 N. U.S. Highway 1  
 Apartment 117  
 City Tequesta State FL Zip Code 33469-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2013  
**Transaction ID : 2014M04L11BE00148**  
 Amount of Each Receipt this Period  
 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Albert Rall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6320 Road 36  
 City Brewster State KS Zip Code 67732-8901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self - Employed Occupation Farmer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 20 / 2014  
**Transaction ID : 2014M04L11BE00149**  
 Amount of Each Receipt this Period  
 225.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Robin Le Roy Aplet**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 131 Roseheart  
 City San Antonio State TX Zip Code 78259-2369  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2012  
**Transaction ID : 2014M04L11BE00150**  
 Amount of Each Receipt this Period  
 160.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Barbara A. Cobb**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2032 Freda Lane  
 City Cardiff By The Sea State CA Zip Code 92007-1419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 02 / 2012  
**Transaction ID : 2014M04L11BE00151**  
 Amount of Each Receipt this Period  
 195.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Norman Jerome Vascocu**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 817  
 City Rayville State LA Zip Code 71269-0817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Richland State Bank Occupation Banker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 24 / 2012  
**Transaction ID : 2014M04L11BE00152**  
 Amount of Each Receipt this Period  
 101.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Robert Weinstein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18 Birch Lane  
 City Shrewsbury State MA Zip Code 01545-1610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Umass Memorial Health Care Occupation Physician  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 26 / 2012  
**Transaction ID : 2014M04L11BE00153**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Louis D. Colletti**  
Full Name (Last, First, Middle Initial)

Mailing Address 3505 Veterans Memorial Highway  
Suite A.

City Ronkonkoma State NY Zip Code 11779-7613

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

Name of Employer Self-Employed Occupation R. E. Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
10 / 30 / 2012  
Transaction ID : 2014M04L11BE00154

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Thomas Jones**  
Full Name (Last, First, Middle Initial)

Mailing Address 800 Dry Valley Road

City Cookeville State TN Zip Code 38506-4940

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

Name of Employer REI Occupation General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
08 / 07 / 2012  
Transaction ID : 2014M04L11BE00155

Amount of Each Receipt this Period  
2000.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mr. Phillip Blair Williams**  
Full Name (Last, First, Middle Initial)

Mailing Address 3009 Plumb Street

City Houston State TX Zip Code 77005-3059

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

Name of Employer Cameron International Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
08 / 09 / 2012  
Transaction ID : 2014M04L11BE00156

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 62 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Sally D'Souza**  
Full Name (Last, First, Middle Initial)

Mailing Address 19 Oar and Line Road

City Plymouth State MA Zip Code 02360-3211

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2012  
**Transaction ID : 2014M04L11BE00157**

Amount of Each Receipt this Period  
 150.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Cody Turner**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 Risa Way  
Apartment 258

City Chico State CA Zip Code 95973-5021

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2014  
**Transaction ID : 2014M04L11BE00158**

Amount of Each Receipt this Period  
 60.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Ms. Dorris Ann Courmier**  
Full Name (Last, First, Middle Initial)

Mailing Address 6963 Private 2155

City Oakwood State TX Zip Code 75855

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2012  
**Transaction ID : 2014M04L11BE00159**

Amount of Each Receipt this Period  
 200.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 63 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. David Galloway**  
Full Name (Last, First, Middle Initial)

Mailing Address 3021 Magnolia Lane

City Bedford State TX Zip Code 76021-2804

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 02 / 28 / 2014  
Transaction ID : 2014M04L11BE00160

Amount of Each Receipt this Period 100.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Dr. David A. Shapiro**  
Full Name (Last, First, Middle Initial)

Mailing Address 1133 5th Avenue

City New York State NY Zip Code 10128-0123

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

Name of Employer Self-Employed Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 10 / 2013  
Transaction ID : 2014M04L11BE00161

Amount of Each Receipt this Period 120.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mr. H. Randolph Holder**  
Full Name (Last, First, Middle Initial)

Mailing Address 930 Tahoe Blvd. Suite 802

City Incline Village State NV Zip Code 89451-9488

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

Name of Employer Self-Employed Occupation Media

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 05 / 2012  
Transaction ID : 2014M04L11BE00162

Amount of Each Receipt this Period 2500.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 64 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. Ms. Kay Dubnoff**

Mailing Address 29 La Noria

City Orinda State CA Zip Code 94563-1835

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 11 / 2012  
**Transaction ID : 2014M04L11BE00163**

Amount of Each Receipt this Period  
 250.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**B. Mr. Seawillow Edwards Urie**

Mailing Address P.O. Box 22237

City Beaumont State TX Zip Code 77720-2237

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2012  
**Transaction ID : 2014M04L11BE00164**

Amount of Each Receipt this Period  
 550.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**C. Mrs. Ann R. Smithson**

Mailing Address 3918 Decatur Avenue

City Kensington State MD Zip Code 20895-1531

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 11 / 2013  
**Transaction ID : 2014M04L11BE00165**

Amount of Each Receipt this Period  
 45.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 65 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Lon Halvorson**  
Full Name (Last, First, Middle Initial)

Mailing Address 12515 Willows Road NE  
Suite 200

City Kirkland State WA Zip Code 98034

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

Name of Employer Monarch Enterprises, Inc. Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 21 / 2012  
**Transaction ID : 2014M04L11BE00166**

Amount of Each Receipt this Period  
1500.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mrs. Barbara Turner**  
Full Name (Last, First, Middle Initial)

Mailing Address 215 Towerwood Court

City Clarinda State IA Zip Code 51632-1342

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 19 / 2012  
**Transaction ID : 2014M04L11BE00167**

Amount of Each Receipt this Period  
150.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Ms. Laurel A. Gainor**  
Full Name (Last, First, Middle Initial)

Mailing Address 6016 High Bluff Trail  
312 Runner Road

City Manassas State VA Zip Code 20111-2638

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

Name of Employer Self Occupation Freelance Writer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2012  
**Transaction ID : 2014M04L11BE00168**

Amount of Each Receipt this Period  
550.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 66 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Donald Hill**  
Full Name (Last, First, Middle Initial)

Mailing Address 1665 Crescent Hills Drive

City LaCrescent State MN Zip Code 55947-9600

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
10 / 30 / 2012  
Transaction ID : 2014M04L11BE00169

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mrs. Marguerite Flynn**  
Full Name (Last, First, Middle Initial)

Mailing Address 580 Saint Paul Street

City North Smithfield State RI Zip Code 02896-6824

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

Name of Employer Carouser Industries Occupation Accountant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
10 / 04 / 2012  
Transaction ID : 2014M04L11BE00170

Amount of Each Receipt this Period  
330.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mrs. Eula Mae Parks**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 526

City Nassawadox State VA Zip Code 23413-0526

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
02 / 03 / 2014  
Transaction ID : 2014M04L11BE00171

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 67 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Mr. J. Calvin Winslow</b>		Date of Receipt MM / DD / YYYY 02 / 05 / 2014 <b>Transaction ID : 2014M04L11BE00172</b>
Mailing Address 128 Cypress Road		Amount of Each Receipt this Period 200.00
City Merry Hill	State NC	Zip Code 27957-9515
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Best effort update of individual information
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 530.00	

Full Name (Last, First, Middle Initial) <b>B. Mrs. Shelley M. Stallings</b>		Date of Receipt MM / DD / YYYY 10 / 18 / 2012 <b>Transaction ID : 2014M04L11BE00173</b>
Mailing Address 23005 N. 74th Street Unit 4027		Amount of Each Receipt this Period 300.00
City Scottsdale	State AZ	Zip Code 85255-7520
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Best effort update of individual information
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. William H. Varn Jr.</b>		Date of Receipt MM / DD / YYYY 02 / 11 / 2014 <b>Transaction ID : 2014M04L11BE00174</b>
Mailing Address P. O. Box 8		Amount of Each Receipt this Period 210.00
City Smoaks	State SC	Zip Code 29481-0008
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Best effort update of individual information
Name of Employer EBSC	Occupation Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Rex Bryce**  
Full Name (Last, First, Middle Initial)

Mailing Address 3424 W 1st St

City Thatcher State AZ Zip Code 85552-5549

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

Name of Employer Self Occupation Medical

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 26 / 2012  
**Transaction ID : 2014M04L11BE00175**

Amount of Each Receipt this Period  
 275.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. E. Robert Carpetner**  
Full Name (Last, First, Middle Initial)

Mailing Address 1906 Suva Circle

City Costa Mesa State CA Zip Code 92626-3541

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 11 / 2014  
**Transaction ID : 2014M04L11BE00176**

Amount of Each Receipt this Period  
 400.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mrs. Anne Brown**  
Full Name (Last, First, Middle Initial)

Mailing Address 4506 Polo Ridge Circle

City Norman State OK Zip Code 73072-3130

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

Name of Employer Retired Occupation Retired

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  
 01 / 27 / 2014  
**Transaction ID : 2014M04L11BE00177**

Amount of Each Receipt this Period  
 300.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 69 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Dr. Manuel Gomez**  
Full Name (Last, First, Middle Initial)

Mailing Address 202 Maplewood Avenue

City Ronceverte      State WV      Zip Code 24970-1334

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

Name of Employer Self-Employed      Occupation Physician

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **110.00**

Date of Receipt **01 / 25 / 2013**  
**Transaction ID : 2014M04L11BE00178**

Amount of Each Receipt this Period **275.00**

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Roger Eslick**  
Full Name (Last, First, Middle Initial)

Mailing Address 2834 380th Street

City Dayton      State IA      Zip Code 50530-7573

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

Name of Employer Self-Employed      Occupation Farmer

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt **02 / 24 / 2014**  
**Transaction ID : 2014M04L11BE00179**

Amount of Each Receipt this Period **110.00**

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mr. Richard Bourne-Vanneck**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1380

City Saint Thomas      State VI      Zip Code 00804-1380

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

Name of Employer Self - Employed      Occupation Attorney

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **02 / 04 / 2013**  
**Transaction ID : 2014M04L11BE00180**

Amount of Each Receipt this Period **275.00**

**[MEMO ITEM]**  
Best effort update of individual information

**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 70 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Henrietta Blackmon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 699  
 City Camden State AL Zip Code 36726-0699  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **210.00**

Date of Receipt **02 / 24 / 2014**  
**Transaction ID : 2014M04L11BE00181**  
 Amount of Each Receipt this Period **100.00**  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Lawrence L. Goessling**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 217 Ditch's Run  
 City Waterloo State IL Zip Code 62298-3274  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Shakespeare Aggregares, Inc. Occupation Aggregates Sales Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 14 / 2014**  
**Transaction ID : 2014M04L11BE00182**  
 Amount of Each Receipt this Period **250.00**  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mrs. Angela M. Hutchison**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 43588 Jackson Hole Circle  
 City Leesburg State VA Zip Code 20176-3959  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 05 / 2013**  
**Transaction ID : 2014M04L11BE00183**  
 Amount of Each Receipt this Period **55.00**  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 71 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Steve Welty**  
Full Name (Last, First, Middle Initial)

Mailing Address 1027 Sapphire Street

City San Diego State CA Zip Code 92109-1848

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

Name of Employer Self-Employed Occupation Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 29 / 2013  
**Transaction ID : 2014M04L11BE00184**

Amount of Each Receipt this Period  
120.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Thomas W. Faller**  
Full Name (Last, First, Middle Initial)

Mailing Address 2241 Greenside Drive

City Springfield State IL Zip Code 62704-3245

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

Name of Employer American Central Bancorp Occupation Banker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2014  
**Transaction ID : 2014M04L11BE00185**

Amount of Each Receipt this Period  
120.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mr. Gerald G. Burtner**  
Full Name (Last, First, Middle Initial)

Mailing Address 733 Castle Kirk Drive

City Baton Rouge State LA Zip Code 70808-6018

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 04 / 2013  
**Transaction ID : 2014M04L11BE00186**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 72 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Dennis M. King**  
Full Name (Last, First, Middle Initial)

Mailing Address 11445 N 78 St

City Omaha State NE Zip Code 68122-4186

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

Name of Employer Securities America Inc Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2013  
**Transaction ID : 2014M04L11BE00187**

Amount of Each Receipt this Period  
 275.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mrs. Robert Giordano**  
Full Name (Last, First, Middle Initial)

Mailing Address 30908 E. Sunset Drive S.

City Redlands State CA Zip Code 92373-7450

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 24 / 2014  
**Transaction ID : 2014M04L11BE00188**

Amount of Each Receipt this Period  
 264.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mr. Charles Collom**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 46647

City St. Pete Beach State FL Zip Code 33741-6647

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2013  
**Transaction ID : 2014M04L11BE00189**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 73 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Dmitry Mogilevsky**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15 Shoreridge  
 City Newport Coast State CA Zip Code 92657-1812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 11 / 2014  
**Transaction ID : 2014M04L11BE00190**  
 Amount of Each Receipt this Period  
 30.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Brian Clayton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1742 Hillmont Drive  
 City Nashville State TN Zip Code 37215-2902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Poly - Med AMG Occupation Nurse Anesthetist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 20 / 2013  
**Transaction ID : 2014M04L11BE00191**  
 Amount of Each Receipt this Period  
 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Eddie Dennis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 609  
 City Pembroke State GA Zip Code 31321-0609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 22 / 2013  
**Transaction ID : 2014M04L11BE00192**  
 Amount of Each Receipt this Period  
 500.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Ms. Fay T. Bakhru**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4801 Bonita Bay Blvd #2004  
 City State Zip Code  
 Bonita Springs FL 34134-5663  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2013  
**Transaction ID : 2014M04L11BE00193**  
 Amount of Each Receipt this Period  
 110.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Dr. John R. Wooley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2504 Eastover Drive  
 City State Zip Code  
 Jackson MS 39211-6728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 The Woman's Clinic Physician  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 29 / 2013  
**Transaction ID : 2014M04L11BE00194**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Ms. Marticia E. Falco**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 Flat Rock Road  
 City State Zip Code  
 Louisville KY 40245-4308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 04 / 2013  
**Transaction ID : 2014M04L11BE00195**  
 Amount of Each Receipt this Period  
 110.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Brian Hersey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 Falcons Ledge Drive  
 City Landrum State SC Zip Code 29356-3107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 01 / 2013  
**Transaction ID : 2014M04L11BE00196**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Keith Kinney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 109 Poplar Avenue  
 City Clearfield State PA Zip Code 16830-3041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2013  
**Transaction ID : 2014M04L11BE00197**  
 Amount of Each Receipt this Period  
 55.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mrs. Teresa Basco**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1008 Snow White Dr  
 City Alexandria State LA Zip Code 71303-3233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer State Of La Occupation Rc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2013  
**Transaction ID : 2014M04L11BE00198**  
 Amount of Each Receipt this Period  
 118.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 76 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Paul Jones**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 231 St. Matthews Avenue  
 City Louisville State KY Zip Code 40207-2039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2013  
**Transaction ID : 2014M04L11BE00199**  
 Amount of Each Receipt this Period  
 500.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. C. D. Faggard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2703 Brianwood Circle  
 City Moss Point State MS Zip Code 39563-2309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2013  
**Transaction ID : 2014M04L11BE00200**  
 Amount of Each Receipt this Period  
 110.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Francis A. Procaccini**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1308 Woodlawn Court  
 City Pittsburgh State PA Zip Code 15241-3530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Lincoln Financial Advisors Occupation Financial Planner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 25 / 2013  
**Transaction ID : 2014M04L11BE00201**  
 Amount of Each Receipt this Period  
 120.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. John F. Patsey**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 60

City State Zip Code  
Wolf Creek MT 59648-0060

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2013  
**Transaction ID : 2014M04L11BE00202**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Michael Culligan**  
Full Name (Last, First, Middle Initial)

Mailing Address 2047 Boulder Springs Lane

City State Zip Code  
Houston TX 77077-1776

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

Name of Employer Occupation  
Conoco Phillips Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 19 / 2014  
**Transaction ID : 2014M04L11BE00203**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mr. Keith Lalime**  
Full Name (Last, First, Middle Initial)

Mailing Address 13910 Prospect Point Drive

City State Zip Code  
Cypress TX 77429-8134

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

Name of Employer Occupation  
Goodman Global H.V.A.C. Technical Support

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 21 / 2013  
**Transaction ID : 2014M04L11BE00204**

Amount of Each Receipt this Period  
35.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 78 OF 2949
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. John Aldridge**  
Full Name (Last, First, Middle Initial)

Mailing Address 653 W. 77th St.

City Tulsa State OK Zip Code 74132-2850

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

Name of Employer Associated Anesthesiologists, Inc. Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 08 / 26 / 2013  
**Transaction ID : 2014M04L11BE00205**

Amount of Each Receipt this Period 250.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Neal A. Presley**  
Full Name (Last, First, Middle Initial)

Mailing Address 27848 County Road 72

City Opp State AL Zip Code 36467-5571

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

Name of Employer Larryls Prescriptions, Inc. Occupation Pharmacist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 02 / 18 / 2014  
**Transaction ID : 2014M04L11BE00206**

Amount of Each Receipt this Period 50.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mrs. Susan L. Leverenz**  
Full Name (Last, First, Middle Initial)

Mailing Address 3439 E. Cedar Hollow Drive

City Pearland State TX Zip Code 77584-8105

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

Name of Employer Deloitte Occupation C.P.A.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 05 / 29 / 2013  
**Transaction ID : 2014M04L11BE00207**

Amount of Each Receipt this Period 250.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 79 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Jimmy Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2739 Terranova Lane  
 City State Zip Code  
 League City TX 77573-3287  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Lubrizol Corporation Turnaround Coordinator  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 06 / 2013  
**Transaction ID : 2014M04L11BE00208**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. George Haux**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2328 18th Circle West  
 City State Zip Code  
 Williston ND 58801-2530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Well Pro, Inc. General Manager  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 14 / 2013  
**Transaction ID : 2014M04L11BE00209**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mrs. Connie S. Keeney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 311 Nyack Drive  
 City State Zip Code  
 Creve Coeur MO 63141-8209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Homemaker Homemaker  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2014  
**Transaction ID : 2014M04L11BE00210**  
 Amount of Each Receipt this Period  
 300.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Brian Hoppy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 414 Minden Way  
 City Wynnewood State PA Zip Code 19096-2324  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hdr Occupation Senior Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 28 / 2013  
**Transaction ID : 2014M04L11BE00211**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. James Rudkins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14400M N. 2200 Road  
 City Hobart State OK Zip Code 73651-6104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self - Employed Occupation Business Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 11 / 2014  
**Transaction ID : 2014M04L11BE00212**  
 Amount of Each Receipt this Period  
 300.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Donald E. Smolinski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6770 Ben Creek Road  
 City Saint Leonard State MD Zip Code 20685-2022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HDW, Ltd. Occupation Motorcycle Repair  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 10 / 2014  
**Transaction ID : 2014M04L11BE00213**  
 Amount of Each Receipt this Period  
 220.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 81 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. James Higgins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1400 Harper Road  
 City Beckley State WV Zip Code 25801-3306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self - Employed Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **0.00**

Date of Receipt **09 / 20 / 2013**  
**Transaction ID : 2014M04L11BE00214**  
 Amount of Each Receipt this Period **1.00**  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mrs. Barbara Arico**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27271 Eastvale Road  
 City Palos Verdes Estates State CA Zip Code 90274-4014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt **02 / 03 / 2014**  
**Transaction ID : 2014M04L11BE00215**  
 Amount of Each Receipt this Period **300.00**  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Robert Harding**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 208 14th Street N.  
 City Sartell State MN Zip Code 56377-2520  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Walmart Occupation Pharmacist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 04 / 2014**  
**Transaction ID : 2014M04L11BE00216**  
 Amount of Each Receipt this Period **100.00**  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. James P. Carraway**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5225 Shipmast Way  
 City Southport State NC Zip Code 28461-8159  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2013  
**Transaction ID : 2014M04L11BE00217**  
 Amount of Each Receipt this Period  
 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Burton H. Patterson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5600 Montclair Drive  
 City Colleyville State TX Zip Code 76034-5029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation 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  
 07 / 29 / 2013  
**Transaction ID : 2014M04L11BE00218**  
 Amount of Each Receipt this Period  
 500.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Ms. Jamie McPhillips Wright**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 314 Bay Hill Drive  
 City Daphne State AL Zip Code 36526-4617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 21 / 2014  
**Transaction ID : 2014M04L11BE00219**  
 Amount of Each Receipt this Period  
 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. Mrs. Shirley A. Brod**

Mailing Address 25 Barcelona Drive

City State Zip Code  
Boulder CO 80303-4901

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2013  
**Transaction ID : 2014M04L11BE00220**

Amount of Each Receipt this Period  
200.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**B. Mr. Harry D. East**

Mailing Address P.O. Box 165

City State Zip Code  
Marion AR 72364-0165

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2013  
**Transaction ID : 2014M04L11BE00221**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**C. Ms. Kristine L. Kenworthy**

Mailing Address 501 Owenwood Place

City State Zip Code  
Paris TN 38242-5156

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

Name of Employer Occupation  
McWorth Management President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 17 / 2013  
**Transaction ID : 2014M04L11BE00222**

Amount of Each Receipt this Period  
300.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 84 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Richard Morton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13 Midship Drive  
 City Barnegat State NJ Zip Code 08005-1416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Unemployed Occupation Truck Driver  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 180.00

Date of Receipt 02 / 28 / 2014  
**Transaction ID : 2014M04L11BE00223**  
 Amount of Each Receipt this Period 60.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mrs. Shelly Pendleton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7419 Foster Creek Drive  
 City Richmond State TX Zip Code 77406-8793  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 10 / 17 / 2013  
**Transaction ID : 2014M04L11BE00224**  
 Amount of Each Receipt this Period 120.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Ms. JoAnn F. Withrow**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3372 Montana Drive  
 City Bonita Springs State FL Zip Code 34134-2662  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 20 / 2013  
**Transaction ID : 2014M04L11BE00225**  
 Amount of Each Receipt this Period 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Mike Walsh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 Red Alder Court  
 City Danville State CA Zip Code 94506-4548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2013  
**Transaction ID : 2014M04L11BE00226**  
 Amount of Each Receipt this Period  
 120.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. David Aldon Maddux**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 79608 Liga  
 City La Quinta State CA Zip Code 92253-6568  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 21 / 2014  
**Transaction ID : 2014M04L11BE00227**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Jerry Green**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2815 Coachlight Lane  
 City Burlington State KY Zip Code 41005-7792  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 22 / 2014  
**Transaction ID : 2014M04L11BE00228**  
 Amount of Each Receipt this Period  
 220.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Stephen Bent**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 361 Moffett Road  
 City Lake Bluff State IL Zip Code 60044-2815  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2013  
**Transaction ID : 2014M04L11BE00229**  
 Amount of Each Receipt this Period  
 550.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mrs. Joanne Cole**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8272 S Pecan Grove Circle  
 City Tempe State AZ Zip Code 85284-2312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 30 / 2013  
**Transaction ID : 2014M04L11BE00230**  
 Amount of Each Receipt this Period  
 300.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Chester Snavelly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 888  
 City Camp Hill State PA Zip Code 17001-0888  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self - Employed Occupation Landlord  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 21 / 2014  
**Transaction ID : 2014M04L11BE00231**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 87 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Dr. Mark Pakan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 184-21 Avon Road  
 City State Zip Code  
 Jamaica NY 11432-5820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self-Employed Dentist  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2013  
**Transaction ID : 2014M04L11BE00232**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Scott W. Saunders**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 437 1/2 2nd Avenue  
 City State Zip Code  
 Gallipolis OH 45631-1129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self - Employed Insurance Broker  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 14 / 2014  
**Transaction ID : 2014M04L11BE00233**  
 Amount of Each Receipt this Period  
 100.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mrs. Sylvia Bryan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 425 Villa Woods Drive  
 City State Zip Code  
 Salisbury NC 28146-0703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 08 / 2014  
**Transaction ID : 2014M04L11BE00234**  
 Amount of Each Receipt this Period  
 170.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Alan Pendergrass**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1625

City Brush Prairie	State WA	Zip Code 98606-1625
-----------------------	-------------	------------------------

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

Name of Employer Pacific Patrol Services	Occupation Owner / Retired Law Enforcement Office
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	10	/	2013

**Transaction ID : 2014M04L11BE00235**

Amount of Each Receipt this Period  

250.00
--------

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Mark Williams**  
Full Name (Last, First, Middle Initial)

Mailing Address 940 Laurelwood Way

City Landrum	State SC	Zip Code 29356-8757
-----------------	-------------	------------------------

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

Name of Employer Electrolock, Inc.	Occupation Vice President
---------------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
0.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2013

**Transaction ID : 2014M04L11BE00236**

Amount of Each Receipt this Period  

2500.00
---------

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mr. Walter P. Signorelli**  
Full Name (Last, First, Middle Initial)

Mailing Address 3016 Douglas Drive

City Yorktown Heights	State NY	Zip Code 10598-2807
--------------------------	-------------	------------------------

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

Name of Employer Self - Employed	Occupation Attorney
-------------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	07	/	2014

**Transaction ID : 2014M04L11BE00237**

Amount of Each Receipt this Period  

550.00
--------

**[MEMO ITEM]**  
Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. Mr. Mark Krings**

Mailing Address 8356 153rd Place

City Savage State MN Zip Code 55378-2388

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

Name of Employer Consolidated Precision Products Occupation Vice President - Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 25 / 2014**  
**Transaction ID : 2014M04L11BE00238**

Amount of Each Receipt this Period  
**330.00**

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**B. Mr. Richard Myers**

Mailing Address 457 Cave Run Lake Road

City Salt Lick State KY Zip Code 40371-8745

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

Name of Employer Laurel Run Management Group Occupation Consultant

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  
**01 / 17 / 2014**  
**Transaction ID : 2014M04L11BE00239**

Amount of Each Receipt this Period  
**250.00**

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**c. Mrs. Craig Christen**

Mailing Address 207 Rainbow Drive #10743

City Livingston State TX Zip Code 77399-2007

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 17 / 2014**  
**Transaction ID : 2014M04L11BE00240**

Amount of Each Receipt this Period  
**360.00**

**[MEMO ITEM]**  
Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. Mr. Craig Nagler**

Mailing Address 9934 Granite Park Court

City State Zip Code  
Granite Bay CA 95746-6759

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

Name of Employer Occupation  
Self - Employed Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 27 / 2014  
**Transaction ID : 2014M04L11BE00241**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**B. Mr. William Shackelford Reeder**

Mailing Address P.O. Box 50836

City State Zip Code  
Midland TX 79710-0836

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

Name of Employer Occupation  
Midland Self Storage Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 18 / 2014  
**Transaction ID : 2014M04L11BE00242**

Amount of Each Receipt this Period  
220.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**C. Ms. Elizabeth Mallinckrodt-Bryden**

Mailing Address 1 W 67th St Apt 611

City State Zip Code  
New York NY 10023-6200

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 03 / 2014  
**Transaction ID : 2014M04L11BE00243**

Amount of Each Receipt this Period  
245.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 91 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Thomas Shirk**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 Riverhills Lane

City Toledo State OH Zip Code 43623-2600

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

Name of Employer Hoosier Magnetics, Inc. Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 03 / 2014  
**Transaction ID : 2014M04L11BE00244**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Mark Witt Allen**  
Full Name (Last, First, Middle Initial)

Mailing Address 6737 W. Lakeside Drive

City Littleton State CO Zip Code 80125-9623

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

Name of Employer Self - Employed Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 04 / 2014  
**Transaction ID : 2014M04L11BE00245**

Amount of Each Receipt this Period  
 1000.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Ms. Joan Legette**  
Full Name (Last, First, Middle Initial)

Mailing Address 14 Sturbridge Lane

City Greensboro State NC Zip Code 27408-3842

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 04 / 2014  
**Transaction ID : 2014M04L11BE00246**

Amount of Each Receipt this Period  
 250.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 92 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Still Hunter**  
Full Name (Last, First, Middle Initial)

Mailing Address 5900 N. Andrews Avenue  
Suite 100

City Fort Lauderdale State FL Zip Code 33309-2371

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

Name of Employer Marcus & Millichap Occupation Senior Vice President, Investments

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 06 / 2014  
**Transaction ID : 2014M04L11BE00247**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mrs. Nydia Sigler**  
Full Name (Last, First, Middle Initial)

Mailing Address 920 Ellison Park Circle

City Denton State TX Zip Code 76205-8031

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 06 / 2014  
**Transaction ID : 2014M04L11BE00248**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mr. Gary Brian Bailey**  
Full Name (Last, First, Middle Initial)

Mailing Address 22720 Whitetail Ln.

City Hersey State MI Zip Code 49639-8652

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

Name of Employer Crossroads Realty of Michigan Occupation Real Estate Broker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
02 / 06 / 2014  
**Transaction ID : 2014M04L11BE00249**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 93 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Jay Churchill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 112 Fountain Drive  
 City State Zip Code  
 Glen Carbon IL 62034-1379  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Phillips 66 Co. Refinery Manager  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 07 / 2014  
**Transaction ID : 2014M04L11BE00250**  
 Amount of Each Receipt this Period  
 500.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mrs. Gail Goodman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 123 Meadow Lane  
 City State Zip Code  
 Solon OH 44139-1444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Homemaker Homemaker  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 11 / 2014  
**Transaction ID : 2014M04L11BE00251**  
 Amount of Each Receipt this Period  
 500.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Melissa McKenzie Dampier**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2006 E. Mallory Street  
 City State Zip Code  
 Pensacola FL 32503-6160  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self - Employed Automobile Dealer  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 11 / 2014  
**Transaction ID : 2014M04L11BE00252**  
 Amount of Each Receipt this Period  
 500.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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: PAGE 94 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. Mr. Randall Young**

Mailing Address 26269 Mesa Place

City Carmel State CA Zip Code 93923-8921

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

Name of Employer Lionshare Media Services Occupation Advertising Agency Owner

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
02 / 12 / 2014  
**Transaction ID : 2014M04L11BE00253**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**B. Mrs. John W. Day Jr.**

Mailing Address 707 Waddington Road

City Bloomfield Hills State MI Zip Code 48301-2348

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
02 / 18 / 2014  
**Transaction ID : 2014M04L11BE00254**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**C. Dr. Paul Branda**

Mailing Address 6518 20th Avenue

City Brooklyn State NY Zip Code 11204-3908

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

Name of Employer Self - Employed Occupation Physician

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
02 / 18 / 2014  
**Transaction ID : 2014M04L11BE00255**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 95 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Donald E. Chaney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4231 Monument Wall Way  
 Apartment 447  
 City State Zip Code  
 Fairfax VA 22030-8442  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Northrop Grumman Director, IT Systems  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 18 / 2014  
**Transaction ID : 2014M04L11BE00256**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. Kevin J. Gramling**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26362 Santa Rosa Avenue  
 City State Zip Code  
 Laguna Hills CA 92653-6218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Klinedinst, P.C. Attorney  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 18 / 2014  
**Transaction ID : 2014M04L11BE00257**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mrs. Grace J. Chosy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 733 Seneca Place  
 City State Zip Code  
 Madison WI 53711-2950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 19 / 2014  
**Transaction ID : 2014M04L11BE00258**  
 Amount of Each Receipt this Period  
 205.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Theresa M. Riggs**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 36932 Stallion Run  
 City Magnolia State TX Zip Code 77355-4613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 19 / 2014  
**Transaction ID : 2014M04L11BE00259**  
 Amount of Each Receipt this Period 1000.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Doyle Glarner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1439 Perrys Hollow Drive  
 City Salt Lake City State UT Zip Code 84103-4254  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Zions Bancorporation Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 19 / 2014  
**Transaction ID : 2014M04L11BE00260**  
 Amount of Each Receipt this Period 500.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Dr. Robert Lewis Robinson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29 County Road 406  
 City luka State MS Zip Code 38852-8533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 20 / 2014  
**Transaction ID : 2014M04L11BE00261**  
 Amount of Each Receipt this Period 300.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 97 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. Mr. Peter Pitz**

Mailing Address 2446 Hardin Ridge Drive

City Henderson	State NV	Zip Code 89052-7084
-------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 20 / 2014  
**Transaction ID : 2014M04L11BE00262**

Amount of Each Receipt this Period  
 1000.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**B. Dale Gifford**

Mailing Address 4543 Rfd

City Long Grove	State IL	Zip Code 60047-7638
--------------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 20 / 2014  
**Transaction ID : 2014M04L11BE00263**

Amount of Each Receipt this Period  
 1000.00

**[MEMO ITEM]**  
Best effort update of individual information

Full Name (Last, First, Middle Initial)  
**C. Mr. Michael Hughes**

Mailing Address 171 Beresford Creek Street

City Charleston	State SC	Zip Code 29492-7522
--------------------	-------------	------------------------

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

Name of Employer National Golf Course	Occupation Business Executive
--	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 21 / 2014  
**Transaction ID : 2014M04L11BE00264**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**  
Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Mary McMillan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1638 W. Knudsen Drive  
 Suite 101  
 City Phoenix State AZ Zip Code 85027-1328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer McMillan Fiberglass Stocks, Inc. Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 24 / 2014  
**Transaction ID : 2014M04L11BE00265**  
 Amount of Each Receipt this Period  
 500.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mr. George Fogg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 91 Spooner Road  
 City Chestnut Hill State MA Zip Code 02467-1819  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 24 / 2014  
**Transaction ID : 2014M04L11BE00266**  
 Amount of Each Receipt this Period  
 1000.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Peter McCall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3316 Society Hill Road  
 City Society Hill State SC Zip Code 29593-8201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 25 / 2014  
**Transaction ID : 2014M04L11BE00267**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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 99 OF 2949
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Robert Jeremias**  
Full Name (Last, First, Middle Initial)

Mailing Address 140 Wedgewood Falls Drive

City	State	Zip Code
Canton	GA	30114-8909

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

Name of Employer	Occupation
T.E. C. Engineering Associates	Sales Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2014

**Transaction ID : 2014M04L11BE00268**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Vaughn Chenoweth**  
Full Name (Last, First, Middle Initial)

Mailing Address 238 Narrows Road

City	State	Zip Code
Coldwater	MI	49036-9622

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

Name of Employer	Occupation
Retired	Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2014

**Transaction ID : 2014M04L11BE00269**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mrs. B. P. Tufts**  
Full Name (Last, First, Middle Initial)

Mailing Address 866 W. Southwood Drive

City	State	Zip Code
Woodland	CA	95695-6844

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

Name of Employer	Occupation
Retired	Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2014

**Transaction ID : 2014M04L11BE00270**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
Best effort update of individual information

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mrs. Kathy Howerton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 1476  
 City Rancho Santa Fe State CA Zip Code 92067-1476  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-Employed Occupation Self-Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2014  
**Transaction ID : 2014M04L11BE00271**  
 Amount of Each Receipt this Period  
 5000.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Bharath Subramanian**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 45 West 10th Street Apartment 1F  
 City New York State NY Zip Code 10011-8727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Capital Z Partners Occupation Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 26 / 2014  
**Transaction ID : 2014M04L11BE00272**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Larry A. Truscott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3691 N. 2600 E.  
 City Twin Falls State ID Zip Code 83301-0185  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ruusco, Inc. Occupation Trucking / Transportation Broker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2014  
**Transaction ID : 2014M04L11BE00273**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**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:	PAGE 101 OF 2949
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Michael McLean**  
Full Name (Last, First, Middle Initial)

Mailing Address 9224 Fetlock Drive

City Mechanicsville State VA Zip Code 23116-3189

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

Name of Employer Argent Federal Credit Union Occupation Network Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2014  
**Transaction ID : 2014M04L11BE00274**

Amount of Each Receipt this Period  
 250.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mrs. Linda G. McLean**  
Full Name (Last, First, Middle Initial)

Mailing Address 9224 Fetlock Drive

City Mechanicsville State VA Zip Code 23116-3189

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

Name of Employer rETIRED Occupation Retire

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2014  
**Transaction ID : 2014M04L11BE00275**

Amount of Each Receipt this Period  
 250.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mr. Steven C. Hamlin**  
Full Name (Last, First, Middle Initial)

Mailing Address 3008 Lake Shore Drive

City Winfield State KS Zip Code 67156-8760

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

Name of Employer Retired Occupation 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  
 02 / 27 / 2014  
**Transaction ID : 2014M04L11BE00276**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 102 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Dennis M. Leon Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address 1316 Hiawatha NE

City Albuquerque State NM Zip Code 87112-4632

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

Name of Employer Retired Occupation 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  
 02 / 27 / 2014  
**Transaction ID : 2014M04L11BE00277**

Amount of Each Receipt this Period  
 500.00

**[MEMO ITEM]**  
Best effort update of individual information

**B. Mr. Herb Jacobs**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 773

City Katy State TX Zip Code 77492-0773

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : 2014M04L11BE00278**

Amount of Each Receipt this Period  
 250.00

**[MEMO ITEM]**  
Best effort update of individual information

**C. Mrs. Joyce McClain**  
Full Name (Last, First, Middle Initial)

Mailing Address 7085 N. County Road 900 E.

City Brownsburg State IN Zip Code 46112-9017

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

Name of Employer Hendricks County Government Occupation Trustee of Friendship and Frienship As

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : 2014M04L11BE00279**

Amount of Each Receipt this Period  
 250.00

**[MEMO ITEM]**  
Best effort update of individual information

**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 103 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. Mr. Richard D. Stinson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 217 W. Brinker Drive  
 City Avondale State AZ Zip Code 85323-1867  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : 2014M04L11BE00280**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**B. Mrs. Anne Derito**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 757 Kingston Court  
 City Apollo Beach State FL Zip Code 33572-2428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedCp Data, LLC Occupation Workflow Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : 2014M04L11BE00281**  
 Amount of Each Receipt this Period  
 250.00  
**[MEMO ITEM]**  
 Best effort update of individual information

**C. Mr. Ray Hassler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. Box 147  
 City Verdi State NV Zip Code 89439-0147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 190.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : 2014M04L11BE00282**  
 Amount of Each Receipt this Period  
 190.00  
**[MEMO ITEM]**  
 Best effort update of individual information

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

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

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

FOR LINE NUMBER: PAGE 104 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SHIRLEY M. ABACHERLI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29875 NEWPORT ROAD  
 City State Zip Code  
 MENIFEE CA 92584-9524  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00001**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. SHIRLEY M. ABACHERLI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29875 NEWPORT ROAD  
 City State Zip Code  
 MENIFEE CA 92584-9524  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00002**  
 Amount of Each Receipt this Period  
 120.00

**C. MRS. SHIRLEY M. ABACHERLI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29875 NEWPORT ROAD  
 City State Zip Code  
 MENIFEE CA 92584-9524  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00003**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 320.00  
**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 105 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LINDA WAUNICE ABALOS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 613 BLUEBONNET LANE  
 City KENNEDALE State TX Zip Code 76060-5801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00004**  
 Amount of Each Receipt this Period 110.00

**B. MR. RONALD J. ABBOTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13926 PAGEHURST TERRACE  
 City MIDLOTHIAN State VA Zip Code 23113-6441  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00005**  
 Amount of Each Receipt this Period 200.00

**C. MRS. LORENE D. ABERNATHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11625 S. LUTHER ROAD  
 City NEWALLA State OK Zip Code 74857-5809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00006**  
 Amount of Each Receipt this Period 15.00

**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: PAGE 106 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LORENE D. ABERNATHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11625 S. LUTHER ROAD  
 City NEWALLA State OK Zip Code 74857-5809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00007**  
 Amount of Each Receipt this Period  
 15.00

**B. MRS. LORENE D. ABERNATHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11625 S. LUTHER ROAD  
 City NEWALLA State OK Zip Code 74857-5809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00008**  
 Amount of Each Receipt this Period  
 61.00

**C. MR. JACK S.D. ABRAHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8702 PALERMO STREET  
 City HOLLIS State NY Zip Code 11423-1222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PRECIOUS GEM RESOURCES Occupation SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00009**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 326.00  
**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 107 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. NANCY B. ACCETTA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 HUDSON STREET  
 City DENVER State CO Zip Code 80220-5832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00010**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. LUIS R. ACEVEDO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6308 MAYNADA STREET  
 City CORAL GABLES State FL Zip Code 33146-3316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00011**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. KEITH WOODHULL ACKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 WEST ST  
 City CROMWELL State CT Zip Code 06416-2139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00012**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00  
**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 108 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DALE A. ACKMANN**  
Full Name (Last, First, Middle Initial)

Mailing Address 4600 41ST AVENUE N.  
APARTMENT 207

City MINNEAPOLIS State MN Zip Code 55422-1854

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00013**

Amount of Each Receipt this Period  
100.00

**B. MR. SAM W. ACOLA**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1185

City ARLINGTON State TX Zip Code 76004-1185

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00014**

Amount of Each Receipt this Period  
220.00

**C. MRS. REBA D. ACREE**  
Full Name (Last, First, Middle Initial)

Mailing Address 15057 LOCUST POINT

City KING GEORGE State VA Zip Code 22485-5247

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

Name of Employer U.R.S. FEDERAL SERVICES Occupation DEPUTY PROGRAM MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00015**

Amount of Each Receipt this Period  
101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 421.00

**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 109 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. REBA D. ACREE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15057 LOCUST POINT  
 City KING GEORGE State VA Zip Code 22485-5247  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.R.S. FEDERAL SERVICES Occupation DEPUTY PROGRAM MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00016**  
 Amount of Each Receipt this Period 100.00

**B. MS. BEBE G. ADAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 503 GRANDVIEW DRIVE  
 City VERONA State PA Zip Code 15147-4001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI00017**  
 Amount of Each Receipt this Period 50.00

**C. MR. CLIFTON E. ADAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3525 SCHAPER AVENUE  
 City ERIE State PA Zip Code 16508-1945  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00018**  
 Amount of Each Receipt this Period 31.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 181.00  
**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 110 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CLIFTON E. ADAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3525 SCHAPER AVENUE  
 City State Zip Code  
 ERIE PA 16508-1945  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 291.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00019**  
 Amount of Each Receipt this Period  
 130.00

**B. MS. COLLEEN P. ADAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3956 NATCHEZ DRIVE  
 City State Zip Code  
 BIRMINGHAM AL 35243-5900  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00020**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. DOUGLAS S. ADAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13001 S. 41ST STREET  
 City State Zip Code  
 PHOENIX AZ 85044-3911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00021**  
 Amount of Each Receipt this Period  
 750.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1080.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. NANCY L. ADAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 548 QUINCE COURT  
 City LA PLATA State MD Zip Code 20646-3275  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE RENTAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00022**  
 Amount of Each Receipt this Period  
 116.00

**B. MR. HARRY ADJMI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 518 AVENUE T.  
 City BROOKLYN State NY Zip Code 11223-4043  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ONE STEP UP LTD. Occupation CLOTHING MANUFACTURER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1011.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00023**  
 Amount of Each Receipt this Period  
 506.00

**C. MR. GEORGE L. ADKINS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711-36 TRAMWAY PLACE NE  
 City ALBUQUERQUE State NM Zip Code 87122-1656  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00024**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	722.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LEE EMERSON ADLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6800 S. GRANITE AVENUE  
 APARTMENT 415  
 City TULSA State OK Zip Code 74136-7044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00025**  
 Amount of Each Receipt this Period  
 426.00  
 Aggregate Year-to-Date ▼  
 926.00

**B. MS. BETTY L. AGEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2725 HUNTINGTON DRIVE  
 City LAS CRUCES State NM Zip Code 88011-5035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00026**  
 Amount of Each Receipt this Period  
 300.00  
 Aggregate Year-to-Date ▼  
 300.00

**C. MR. MOSHE AHARONI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1479 E 26TH ST  
 City BROOKLYN State NY Zip Code 11210-5232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00027**  
 Amount of Each Receipt this Period  
 275.00  
 Aggregate Year-to-Date ▼  
 275.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1001.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. FLORENCE M. AHERN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1110 MILLS SPRINGS  
 City RICHARDSON State TX Zip Code 75080-1408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00028**  
 Amount of Each Receipt this Period 150.00

**B. MR. KEVIN AHERN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6654 LAJOLLA BLVD.  
 City LA JOLLA State CA Zip Code 92037-6021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AHERN AGRIBUSINESS INC. Occupation C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00029**  
 Amount of Each Receipt this Period 1000.00

**C. MS. VICTORIA AHMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 718 RUCKER AVENUE  
 City EVERETT State WA Zip Code 98201-1308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00030**  
 Amount of Each Receipt this Period 2.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1152.00  
**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 114 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES R. AHRENHOLZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1621 N. 17TH STREET  
 City MOUNT VERNON State IL Zip Code 62864-2601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00031**  
 Amount of Each Receipt this Period 200.00

**B. MR. HERBERT EDWIN AHRENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3089 WEINHEIMER ROAD  
 City FREDERICKSBURG State TX Zip Code 78624-6419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER/RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00032**  
 Amount of Each Receipt this Period 50.00

**C. MR. HERBERT EDWIN AHRENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3089 WEINHEIMER ROAD  
 City FREDERICKSBURG State TX Zip Code 78624-6419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER/RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00033**  
 Amount of Each Receipt this Period 201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 451.00  
**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 115 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JOHN W. AINSLIE SR.**

Mailing Address 2424 HIGHLAND CAPE LANE

City State Zip Code  
VIRGINIA BEACH VA 23456-1515

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00034**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**B. MR. JOHN W. AINSLIE SR.**

Mailing Address 2424 HIGHLAND CAPE LANE

City State Zip Code  
VIRGINIA BEACH VA 23456-1515

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00035**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MR. JOHN W. AINSLIE SR.**

Mailing Address 2424 HIGHLAND CAPE LANE

City State Zip Code  
VIRGINIA BEACH VA 23456-1515

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00036**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 290.00

**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 116 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JOSEPH AKERMAN**

Mailing Address 2843 S. BAYSHORE DRIVE

City State Zip Code  
MIAMI FL 33133-6015

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

Name of Employer Occupation  
SELF FINANCE

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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00037**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. MR. DAVID J. AKERS**

Mailing Address 1313 CAROLINA STREET

City State Zip Code  
GRAHAM TX 76450-4305

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

Name of Employer Occupation  
AKERS PETROLEUM FIELD SUPERVISOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00038**

Amount of Each Receipt this Period  
15.00

Full Name (Last, First, Middle Initial)  
**C. MR. DAVID J. AKERS**

Mailing Address 1313 CAROLINA STREET

City State Zip Code  
GRAHAM TX 76450-4305

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

Name of Employer Occupation  
AKERS PETROLEUM FIELD SUPERVISOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00039**

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 335.00

**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 117 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DAVID J. AKERS**

Mailing Address 1313 CAROLINA STREET

City State Zip Code  
GRAHAM TX 76450-4305

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

Name of Employer Occupation  
AKERS PETROLEUM FIELD SUPERVISOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.00

Date of Receipt  
03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00040**

Amount of Each Receipt this Period  
20.00

Full Name (Last, First, Middle Initial)  
**B. MRS. SUSAN D. AKERS**

Mailing Address 1 STURGES HIGHWAY

City State Zip Code  
WESTPORT CT 06880-2810

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00041**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. MR. JAMES F. AKIN JR.**

Mailing Address P.O. BOX 247

City State Zip Code  
WESTCLIFFE CO 81252-0247

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00042**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1070.00

**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 118 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES F. AKIN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 247  
 City WESTCLIFFE State CO Zip Code 81252-0247  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00043**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. NERSES AKOPYAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 424 W. COLORADO STREET SUITE 200A  
 City GLENDALE State CA Zip Code 91204-4817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00044**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. GARY D. AKRIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6508 BARKWOOD LANE  
 City DALLAS State TX Zip Code 75248-3911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MORTGAGE BROKER  
 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  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00045**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	440.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MATHEW J. ALAGNA JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 19 RUFFLED FEATHERS DRIVE

City LEMONT State IL Zip Code 60439-7751

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

Name of Employer SELF-EMPLOYED Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00046**

Amount of Each Receipt this Period  
 201.00

**B. MR. MARIO ALAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1737 HOBART STREET N.W.

City WASHINGTON State DC Zip Code 20009-2907

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

Name of Employer SELF-EMPLOYED Occupation CHEF

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00047**

Amount of Each Receipt this Period  
 225.00

**C. COLONEL JACK R. ALBRECHT**  
Full Name (Last, First, Middle Initial)

Mailing Address 5607 MILITARY COURT

City FAIRFIELD State CA Zip Code 94533-9725

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 641.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00048**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	526.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 120 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. COLONEL JACK R. ALBRECHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5607 MILITARY COURT  
 City State Zip Code  
 FAIRFIELD CA 94533-9725  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 641.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00049**  
 Amount of Each Receipt this Period  
 121.00

**B. MR. ROBERT D. ALBRIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14 DEER PATH DRIVE  
 City State Zip Code  
 SALEM IL 62881-1040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00050**  
 Amount of Each Receipt this Period  
 60.00

**C. MR. ROBERT D. ALBRIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14 DEER PATH DRIVE  
 City State Zip Code  
 SALEM IL 62881-1040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00051**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 231.00  
**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 121 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT D. ALBRIGHT**  
Full Name (Last, First, Middle Initial)

Mailing Address 14 DEER PATH DRIVE

City SALEM State IL Zip Code 62881-1040

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

Name of Employer RETIRED Occupation RETIRED

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  
**03 / 19 / 2014**

**Transaction ID : 2014M04L11AI00052**

Amount of Each Receipt this Period  
**85.00**

**B. MR. CHARLES A. ALCORN**  
Full Name (Last, First, Middle Initial)

Mailing Address 142 JUNIPER COURT

City COPPELL State TX Zip Code 75019-7968

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 10 / 2014**

**Transaction ID : 2014M04L11AI00053**

Amount of Each Receipt this Period  
**100.00**

**C. MR. WALLACE E. ALDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 13809 S.E. 52ND PLACE

City BELLEVUE State WA Zip Code 98006-3421

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 05 / 2014**

**Transaction ID : 2014M04L11AI00054**

Amount of Each Receipt this Period  
**240.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>425.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 122 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. A. PETER ALDRIAN**

Mailing Address P.O. BOX 613

City State Zip Code  
PINELAND FL 33945-0613

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

Name of Employer Occupation  
SELF-EMPLOYED SALES

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00055**

Amount of Each Receipt this Period  
400.00

Full Name (Last, First, Middle Initial)  
**B. MR. FRED C. ALDRIDGE JR.**

Mailing Address 800 COLLEGE AVENUE

City State Zip Code  
HAVERFORD PA 19041-1205

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00056**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MRS. GWEN W. ALDRIDGE**

Mailing Address 296 CAMELOT DRIVE

City State Zip Code  
NOKOMIS FL 34275-1874

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
613.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00057**

Amount of Each Receipt this Period  
60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 960.00

**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 123 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. GWEN W. ALDRIDGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 296 CAMELOT DRIVE  
 City NOKOMIS State FL Zip Code 34275-1874  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 613.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00058**  
 Amount of Each Receipt this Period  
 25.00

**B. MRS. GWEN W. ALDRIDGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 296 CAMELOT DRIVE  
 City NOKOMIS State FL Zip Code 34275-1874  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 613.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00059**  
 Amount of Each Receipt this Period  
 46.00

**C. MRS. GWEN W. ALDRIDGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 296 CAMELOT DRIVE  
 City NOKOMIS State FL Zip Code 34275-1874  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 613.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00060**  
 Amount of Each Receipt this Period  
 60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 131.00  
**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 124 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. GWENDOLYN WREN ALDRIDGE**  
Full Name (Last, First, Middle Initial)

Mailing Address 13467 185TH LANE N.W.

City ELK RIVER	State MN	Zip Code 55330-2704
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2014

**Transaction ID : 2014M04L11AI00061**

Amount of Each Receipt this Period  
60.00

**B. MRS. GWENDOLYN WREN ALDRIDGE**  
Full Name (Last, First, Middle Initial)

Mailing Address 13467 185TH LANE N.W.

City ELK RIVER	State MN	Zip Code 55330-2704
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI00062**

Amount of Each Receipt this Period  
60.00

**C. MRS. GWENDOLYN WREN ALDRIDGE**  
Full Name (Last, First, Middle Initial)

Mailing Address 13467 185TH LANE N.W.

City ELK RIVER	State MN	Zip Code 55330-2704
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2014

**Transaction ID : 2014M04L11AI00063**

Amount of Each Receipt this Period  
61.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	181.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. L. ALESSANDRINI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 212 EILEENS WAY  
 City HOCKESSIN State DE Zip Code 19707-9196  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PL Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00064**  
 Amount of Each Receipt this Period  
 120.00

**B. MRS. KATHY ALEXANDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 911 W. GRAND STREET  
 City MARLOW State OK Zip Code 73055-3247  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 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  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00065**  
 Amount of Each Receipt this Period  
 300.00

**C. DR. ABDUL H. ALKHAFAJI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25114 ALDENSHIRE COURT  
 City KATY State TX Zip Code 77494-2947  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00066**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	470.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 126 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. ABDUL H. ALKHAFAJI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25114 ALDENSHIRE COURT  
 City KATY State TX Zip Code 77494-2947  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00067**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. HENRY EUGENE ALLAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1295 S. CAWSTON AVENUE  
 SPACE 57  
 City HEMET State CA Zip Code 92545-9161  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00068**  
 Amount of Each Receipt this Period  
 135.00

**C. MR. JOHNNIE ALLAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9155 REAL ROAD  
 City SAN ANTONIO State TX Zip Code 78263-3319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer G.T.S. IROZZOTTI Occupation CONSTRUCTION FOREMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00069**  
 Amount of Each Receipt this Period  
 350.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 535.00  
**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 127 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JERRY W. ALLARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9281 RANDALL AVENUE  
 City LA HABRA State CA Zip Code 90631-3438  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00070**  
 Amount of Each Receipt this Period  
 30.00

**B. MR. JERRY W. ALLARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9281 RANDALL AVENUE  
 City LA HABRA State CA Zip Code 90631-3438  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00071**  
 Amount of Each Receipt this Period  
 31.00

**C. MS. ANDRIA ALLEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 73  
 City SOUTH LANCASTER State MA Zip Code 01561-0073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NYPRO, INC. Occupation LABORER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00072**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	181.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 128 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ANDRIA ALLEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 73  
 City SOUTH LANCASTER State MA Zip Code 01561-0073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NYPRO, INC. Occupation LABORER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00073**  
 Amount of Each Receipt this Period  
 120.00

**B. MS. ANDRIA ALLEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 73  
 City SOUTH LANCASTER State MA Zip Code 01561-0073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NYPRO, INC. Occupation LABORER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00074**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. BOYCE H. ALLEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 ALLEN DALE CIRCLE  
 City RUSTBURG State VA Zip Code 24588-4087  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MOBILE HOME SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00075**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 490.00  
**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 129 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DAVID ALLEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2059 CAMELOT DRIVE  
 City OKLAHOMA CITY State OK Zip Code 73130-8203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00076**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. DAVID ALLEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2059 CAMELOT DRIVE  
 City OKLAHOMA CITY State OK Zip Code 73130-8203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00077**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. GERALD J. ALLEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3040 GRAND BAY BLVD. UNIT 236  
 City LONGBOAT KEY State FL Zip Code 34228-4400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 862.00

Date of Receipt  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00078**  
 Amount of Each Receipt this Period  
 220.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	520.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 130 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GERALD J. ALLEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3040 GRAND BAY BLVD.  
 UNIT 236  
 City LONGBOAT KEY State FL Zip Code 34228-4400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 862.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00079**  
 Amount of Each Receipt this Period  
 200.00

**B. MRS. GERTRUDE ALLEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 325 ALIDA WAY  
 City SOUTH SAN FRANCISCO State CA Zip Code 94080-5953  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00080**  
 Amount of Each Receipt this Period  
 30.00

**C. MR. GORDON E. ALLEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 389 INDIES DRIVE  
 City ORCHID State FL Zip Code 32963-9559  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00081**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 330.00  
**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 131 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. JOHN ALLEN JR.</b>		Date of Receipt										
Mailing Address P.O. BOX 718		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>10</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	10	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	10	/	2014								
City State Zip Code CALHOUN LA 71225-0718		<b>Transaction ID : 2014M04L11AI00082</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00										
Name of Employer REQUESTED	Occupation REQUESTED											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00											

Full Name (Last, First, Middle Initial) <b>B. MR. JOHN F. ALLEN SR.</b>		Date of Receipt										
Mailing Address 979 N. BOLTON AVENUE		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>12</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	12	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	12	/	2014								
City State Zip Code INDIANAPOLIS IN 46219-4514		<b>Transaction ID : 2014M04L11AI00083</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00										
Name of Employer RETIRED	Occupation RETIRED											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00											

Full Name (Last, First, Middle Initial) <b>C. MR. NEAL M. ALLEN</b>		Date of Receipt										
Mailing Address 4220 LOWER ROSWELL ROAD		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>10</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	10	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	10	/	2014								
City State Zip Code MARIETTA GA 30068-4128		<b>Transaction ID : 2014M04L11AI00084</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00										
Name of Employer RETIRED	Occupation RETIRED											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00											

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RALPH J. ALLEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1714 BENTBROOK DRIVE  
 City CHAMPAIGN State IL Zip Code 61822-9217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00085**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. WILLIAM HARRY ALLEN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11111 S. QUEBEC AVENUE  
 City TULSA State OK Zip Code 74137-7513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ALLIED BEARINGS SUPPLY COMPANY, INC. Occupation EXECUTIVE  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 376.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00086**  
 Amount of Each Receipt this Period  
 376.00

**C. MR. THOMAS ALLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 28 NIBLICK LANE  
 City LITTLETON State CO Zip Code 80123-6622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.B.S. PAINE WEBBER Occupation INVESTMENT CONSULTANT  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00087**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	746.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 133 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. ANN ALLUMS**

Mailing Address 2412 BLUE HAVEN DRIVE

City State Zip Code  
NEW IBERIA LA 70563-2133

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00088**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. MS. ANN ALLUMS**

Mailing Address 2412 BLUE HAVEN DRIVE

City State Zip Code  
NEW IBERIA LA 70563-2133

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00089**

Amount of Each Receipt this Period  
55.00

Full Name (Last, First, Middle Initial)  
**C. MS. ANN ALLUMS**

Mailing Address 2412 BLUE HAVEN DRIVE

City State Zip Code  
NEW IBERIA LA 70563-2133

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00090**

Amount of Each Receipt this Period  
120.00

**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: PAGE 134 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ROBERT N. ALMON SR.**

Mailing Address P.O. BOX 2687

City State Zip Code  
TUSCALOOSA AL 35403-2687

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00091**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT N. ALMON**

Mailing Address 723 CANYON ROAD N.

City State Zip Code  
TUSCALOOSA AL 35406-2101

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

Name of Employer Occupation  
SELF-EMPLOYED CONSULTING ENGINEER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00092**

Amount of Each Receipt this Period  
335.00

Full Name (Last, First, Middle Initial)  
**C. MS. DORIS A. ALPERT**

Mailing Address 3115 S. OCEAN BLVD.  
APARTMENT 904

City State Zip Code  
HIGHLAND BEACH FL 33487-2575

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00093**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 935.00

**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

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. G. TODD ALTER**

Mailing Address P.O. BOX 1535

City State Zip Code  
MARTINSBURG WV 25402-1535

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

Name of Employer Occupation  
SELF-EMPLOYED REAL ESTATE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00094**

Amount of Each Receipt this Period  
202.00

Full Name (Last, First, Middle Initial)  
**B. MRS. MARY ALTER**

Mailing Address 5106 QUINCY COURT

City State Zip Code  
COLUMBUS IN 47203-8137

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00095**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MRS. MARY ALTER**

Mailing Address 5106 QUINCY COURT

City State Zip Code  
COLUMBUS IN 47203-8137

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00096**

Amount of Each Receipt this Period  
106.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 408.00

**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 136 OF 2949	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TIMOTHY E. ALVIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 450 STONE RIDGE

City SPRINGVILLE State AL Zip Code 35146-5012

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

Name of Employer AMERICA'S THRIFT STORES Occupation RETAIL MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00097**

Amount of Each Receipt this Period  
 245.00

**B. MR. DAVID B. AMATO**  
Full Name (Last, First, Middle Initial)

Mailing Address 6870 SE 144TH PLACE ROAD

City SUMMERFIELD State FL Zip Code 34491-3200

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

Name of Employer PUBLIX SUPER MARKETS Occupation PHARMACIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00098**

Amount of Each Receipt this Period  
 55.00

**C. MR. DAVID B. AMATO**  
Full Name (Last, First, Middle Initial)

Mailing Address 6870 SE 144TH PLACE ROAD

City SUMMERFIELD State FL Zip Code 34491-3200

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

Name of Employer PUBLIX SUPER MARKETS Occupation PHARMACIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00099**

Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 335.00

**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 137 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID B. AMATO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6870 SE 144TH PLACE ROAD  
 City State Zip Code  
 SUMMERFIELD FL 34491-3200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PUBLIX SUPER MARKETS PHARMACIST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00100**  
 Amount of Each Receipt this Period  
 31.00

**B. MR. JOHN G. AMATO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1615 POYDRAS STREET  
 SUITE 2270  
 City State Zip Code  
 NEW ORLEANS LA 70112-1254  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED ATTORNEY  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00101**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. GILBERT F. AMELIO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5835 STRASBOURG COURT  
 City State Zip Code  
 RENO NV 89511-5023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED SENIOR EXECUTIVE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00102**  
 Amount of Each Receipt this Period  
 550.00

**SUBTOTAL** of Receipts This Page (optional)..... ► 1581.00  
**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 138 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT AMEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7983 VIZCAYA WAY  
 City NAPLES State FL Zip Code 34108-7704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 505.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00103**  
 Amount of Each Receipt this Period  
 505.00

**B. MR. CHARLES J. AMIDON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 358  
 City FORSYTH State MO Zip Code 65653-0358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NATNAL ENZYME COMPANY Occupation CHIEF OPERATING OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00104**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. CHARLES J. AMIDON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 358  
 City FORSYTH State MO Zip Code 65653-0358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NATNAL ENZYME COMPANY Occupation CHIEF OPERATING OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00105**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	725.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES J. AMIDON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 358  
 City FORSYTH State MO Zip Code 65653-0358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NATNAL ENZYME COMPANY Occupation CHIEF OPERATING OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00106**  
 Amount of Each Receipt this Period  
 101.00

**B. MR. PAUL S. AMOS II**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 5120  
 City COLUMBUS State GA Zip Code 31906-0120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AFLAC Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00107**  
 Amount of Each Receipt this Period  
 1250.00

**C. MR. FRANCIS X. AMSLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18 TAHOE SHORES COURT  
 City HUMBLE State TX Zip Code 77346-2587  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.B.S. FINANCIAL SERVICES Occupation FINANCIAL CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00108**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2351.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DENNIS AMSTUTZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 575 S. MAIN STREET

City State Zip Code  
BLUFFTON OH 45817-1079

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 20 / 2014  
**Transaction ID : 2014M04L11AI00109**

Amount of Each Receipt this Period  
85.00

**B. MR. JOHN E. AMSTUTZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 8307 TIMBERWOOD COURT

City State Zip Code  
FORT WAYNE IN 46825-7107

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

Name of Employer Occupation  
AMSTATE INSURANCE, INC. INSURANCE AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00110**

Amount of Each Receipt this Period  
275.00

**C. MR. RICHARD E. AMTOWER III**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2456

City State Zip Code  
RANCHO SANTA FE CA 92067-2456

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

Name of Employer Occupation  
NONE NONE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00111**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1360.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 141 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. VICKI E. AMUNDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 842 N. 8TH STREET  
 City BLACK RIVER FALLS State WI Zip Code 54615-9107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI00112**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. MICHAEL ANACLERIO SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 306 COLLETON AVENUE S.E.  
 City AIKEN State SC Zip Code 29801-7102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MORGAN STANLEY Occupation SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI00113**  
 Amount of Each Receipt this Period  
 30.00

**C. MR. MICHAEL ANACLERIO SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 306 COLLETON AVENUE S.E.  
 City AIKEN State SC Zip Code 29801-7102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MORGAN STANLEY Occupation SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00114**  
 Amount of Each Receipt this Period  
 85.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 615.00  
**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 142 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL ANACLERIO SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 306 COLLETON AVENUE S.E.  
 City State Zip Code  
 AIKEN SC 29801-7102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MORGAN STANLEY SALES  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 465.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00115**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. MICHAEL ANACLERIO SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 306 COLLETON AVENUE S.E.  
 City State Zip Code  
 AIKEN SC 29801-7102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MORGAN STANLEY SALES  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 465.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00116**  
 Amount of Each Receipt this Period  
 75.00

**C. MR. DAVID C. ANDERSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17635 UPLAND AVENUE  
 City State Zip Code  
 FONTANA CA 92335-8534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 345.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00117**  
 Amount of Each Receipt this Period  
 180.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 355.00  
**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 143 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CAROL H. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1025 STRONG RD  
 City VICTOR State NY Zip Code 14564-9124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI00118**  
 Amount of Each Receipt this Period  
 200.00

**B. MS. CAROL H. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1025 STRONG RD  
 City VICTOR State NY Zip Code 14564-9124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI00119**  
 Amount of Each Receipt this Period  
 200.00

**C. MS. CAROL H. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1025 STRONG RD  
 City VICTOR State NY Zip Code 14564-9124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00120**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 144 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CAROL H. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1025 STRONG RD  
 City VICTOR State NY Zip Code 14564-9124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00121**  
 Amount of Each Receipt this Period 200.00

**B. MR. DARRELL L. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5601 E. PASEO REMEDIOS  
 City TUCSON State AZ Zip Code 85750-1601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00122**  
 Amount of Each Receipt this Period 100.00

**C. MR. DARRELL L. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5601 E. PASEO REMEDIOS  
 City TUCSON State AZ Zip Code 85750-1601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00123**  
 Amount of Each Receipt this Period 126.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 426.00  
**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

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(check only one)  
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 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DONNA ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11966 U.S. HIGHWAY 169  
 City HILL CITY State MN Zip Code 55748-1592  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00124**  
 Amount of Each Receipt this Period  
 65.00

**B. MR. HAROLD ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 803 OZARK SHORT LINE  
 City ODESSA State MO Zip Code 64076-1625  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 316.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00125**  
 Amount of Each Receipt this Period  
 66.00

**C. MS. JOAN J. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 BRENTWOOD COURT  
 City SCOTTSBLUFF State NE Zip Code 69361-1474  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00126**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 231.00  
**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 146 OF 2949  
(check only one)  
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. JOAN J. ANDERSON**

Mailing Address **20 BRENTWOOD COURT**

City **SCOTTSBLUFF**      State **NE**      Zip Code **69361-1474**

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

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
**03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI00127**

Amount of Each Receipt this Period  
**120.00**

Full Name (Last, First, Middle Initial)  
**B. MR. JOHN RICHARD ANDERSON**

Mailing Address **P. O. BOX 136  
4750 MULESHOE RANCH ROAD**

City **GAIL**      State **TX**      Zip Code **79738-0136**

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

Name of Employer **SELF-EMPLOYED**      Occupation **RANCHER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **501.00**

Date of Receipt  
**03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI00128**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**C. MR. JOHN RICHARD ANDERSON**

Mailing Address **P. O. BOX 136  
4750 MULESHOE RANCH ROAD**

City **GAIL**      State **TX**      Zip Code **79738-0136**

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

Name of Employer **SELF-EMPLOYED**      Occupation **RANCHER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **501.00**

Date of Receipt  
**03 / 26 / 2014**  
**Transaction ID : 2014M04L11AI00129**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **620.00**

**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 147 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN RICHARD ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 136  
 4750 MULESHOE RANCH ROAD  
 City GAIL State TX Zip Code 79738-0136  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00130**  
 Amount of Each Receipt this Period  
 1.00

**B. MS. JUANITA L. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2011 TRIPPE STREET  
 City RICHLAND State WA Zip Code 99354-2726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00131**  
 Amount of Each Receipt this Period  
 40.00

**C. MS. JUANITA L. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2011 TRIPPE STREET  
 City RICHLAND State WA Zip Code 99354-2726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00132**  
 Amount of Each Receipt this Period  
 45.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	86.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 148 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JUANITA L. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2011 TRIPPE STREET  
 City RICHLAND State WA Zip Code 99354-2726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00133**  
 Amount of Each Receipt this Period 46.00

**B. MS. KAREN G. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5000 COLLEGE BLVD. SUITE 120  
 City OVERLAND PARK State KS Zip Code 66211-1871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00134**  
 Amount of Each Receipt this Period 1000.00

**C. MR. KENNETH W. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 8189  
 City HORSESHOE BAY State TX Zip Code 78657-8189  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 376.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00135**  
 Amount of Each Receipt this Period 1.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1047.00  
**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

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(check only one)  
 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LARRY W. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 7726  
 City HORSESHOE BAY State TX Zip Code 78657-7726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00136**  
 Amount of Each Receipt this Period  
 140.00

**B. MS. MARY CREED ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 291  
 City ORCAS State WA Zip Code 98280-0291  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00137**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. RALPH J. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 122 SOTA DR  
 City JUPITER State FL Zip Code 33458-7726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00138**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 490.00  
**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 150 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD P. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1833 S. HOLLAND SYLVANIA ROAD  
 City MAUMEE State OH Zip Code 43537-1380  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00139**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. ROBERT S. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2040 E. HILLMAN CIRCLE  
 City ORANGE State CA Zip Code 92867-1817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI00140**  
 Amount of Each Receipt this Period  
 55.00

**C. MR. ROBERT S. ANDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2040 E. HILLMAN CIRCLE  
 City ORANGE State CA Zip Code 92867-1817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00141**  
 Amount of Each Receipt this Period  
 35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1090.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. PAUL ANDERTON**

Mailing Address 6510 HAUGHTON CT

City SPRING State TX Zip Code 77389-5265

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

Name of Employer ANADARKO PATROLIAM Occupation FINANCE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00142**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. MR. GILBERT H. ANDRES**

Mailing Address 400 BALBOA COURT

City IRVING State TX Zip Code 75062-3838

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

Name of Employer ANDRES CONSTRUCTION SERVICES Occupation CONTRACTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00143**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MR. LLOYD B. ANDREW**

Mailing Address 321 GATEWOOD DRIVE  
APARTMENT E1

City GREENWOOD State SC Zip Code 29646-9271

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00144**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.00

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

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

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRUCE ANDREWS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1421 BAYSIDE DRIVE  
 City State Zip Code  
 CORONA DL MAR CA 92625-1710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00145**  
 Amount of Each Receipt this Period  
 201.00

**B. MR. JAMES K. ANDREWS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 857 INDUSTRY ROAD  
 City State Zip Code  
 ATWATER OH 44201-7107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 FIRST ENERGY CORP. ELECTRICAL ENGINEER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00146**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. WILLIAM F. ANDREWS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1409 MORAN ROAD  
 City State Zip Code  
 FRANKLIN TN 37069-6301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CORRECTIONS CRY OF AMERICA CHAIRMAN OF EXECUTIVE COMMITTEE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00147**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 441.00  
**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 153 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DWIGHT ANDRUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address SHANNON ROAD 139  
 City LAFAYETTE State LA Zip Code 70503-3510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00148**  
 Amount of Each Receipt this Period  
 1000.00

**B. ERNEST ANGELO, JR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 410 N ZMZIN  
 City MIDLAND State TX Zip Code 79701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation PETROLEUM ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00149**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. H. GLENN ANGLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5014 N. LAKE DRIVE  
 City ROANOKE State VA Zip Code 24019-2726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00150**  
 Amount of Each Receipt this Period  
 235.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1735.00  
**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 154 OF 2949
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. ELBA G. APONTE**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 331067

City PONCE State PR Zip Code 00733-1067

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

Name of Employer SELF-EMPLOYED Occupation MEDICAL CHILD PYCHIATRIST/PHYSICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00151**

Amount of Each Receipt this Period  
 500.00

**B. DR. S. G. APPAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 700 PALOMINO STREET

City LEAGUE CITY State TX Zip Code 77573-1710

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00152**

Amount of Each Receipt this Period  
 100.00

**C. MR. DEWEY ARAKAWA**  
Full Name (Last, First, Middle Initial)

Mailing Address 94-621 KUPUNA LOOP

City WAIPAHU State HI Zip Code 96797-1120

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

Name of Employer RETIRED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00153**

Amount of Each Receipt this Period  
 350.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LOREN ARBUCKLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13 ROYAL DALTON CIRCLE  
 City CONROE State TX Zip Code 77304-9719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00154**  
 Amount of Each Receipt this Period  
 251.00

**B. RICHARD ARCIERO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2335 RIVER RD  
 City HAMILTON State NY Zip Code 13346-2651  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BENEFIT ADVISORS OF NY, INC. Occupation EMPLOYEE BENEFIT BROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00155**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. HAMILTON G. ARDEN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 710 LAGOON ROAD  
 City VERO BEACH State FL Zip Code 32963-2259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00156**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	552.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. MARY L. ARDINGER</b>		Date of Receipt 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI00157</b>
Mailing Address 11 WINDSOR RIDGE		Amount of Each Receipt this Period 1000.00
City FRISCO	State TX	Zip Code 75034-6858
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. GEORGE ARDOLINO</b>		Date of Receipt 03 / 04 / 2014 <b>Transaction ID : 2014M04L11AI00158</b>
Mailing Address 5557 DUBLIN RD		Amount of Each Receipt this Period 500.00
City DUBLIN	State OH	Zip Code 43017-1505
FEC ID number of contributing federal political committee. C		
Name of Employer AMETEC	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. MR. WESLEY ARGO</b>		Date of Receipt 03 / 17 / 2014 <b>Transaction ID : 2014M04L11AI00159</b>
Mailing Address 535 GRADYVILLE ROAD APARTMENT G128		Amount of Each Receipt this Period 55.00
City NEWTOWN SQUARE	State PA	Zip Code 19073-2814
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1555.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JORGE A. ARGUELLES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8125 SW 52 AVENUE  
 City MIAMI State FL Zip Code 33143-8436  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00160**  
 Amount of Each Receipt this Period 100.00

**B. MRS. BARBARA ARICO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27271 EASTVALE ROAD  
 City PALOS VERDES ESTATES State CA Zip Code 90274-4014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00161**  
 Amount of Each Receipt this Period 50.00

**C. MR. MICHAEL S. ARIENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N. 7449 ROUND LAKE ROAD  
 City BRILLION State WI Zip Code 54110-9474  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MANUFACTURER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2201.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00162**  
 Amount of Each Receipt this Period 1100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL S. ARIENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N. 7449 ROUND LAKE ROAD  
 City BRILLION State WI Zip Code 54110-9474  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MANUFACTURER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2201.00**

Date of Receipt **03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI00163**  
 Amount of Each Receipt this Period **1.00**

**B. MR. RICHARD A. ARKENBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 2  
 City WARETOWN State NJ Zip Code 08758-0002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INDIVIDUAL INVESTOR  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **570.00**

Date of Receipt **03 / 05 / 2014**  
**Transaction ID : 2014M04L11AI00164**  
 Amount of Each Receipt this Period **110.00**

**C. MR. JOHN ARMSTRONG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3440 S. JEFFERSON STREET APARTMENT 616  
 City FALLS CHURCH State VA Zip Code 22041-3125  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **221.00**

Date of Receipt **03 / 21 / 2014**  
**Transaction ID : 2014M04L11AI00165**  
 Amount of Each Receipt this Period **1.00**

**SUBTOTAL** of Receipts This Page (optional)..... **112.00**  
**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 159 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. RICHARD ARMSTRONG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10011 RIMSTONE  
 City MABELVALE State AR Zip Code 72103-4980  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: QUALCHOICE Occupation: M.D.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00166**  
 Amount of Each Receipt this Period: 110.00

**B. MR. RICHARD A. ARMSTRONG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11806 OAKMONT COURT  
 City FORT MYERS State FL Zip Code 33908-2826  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: RETIRED Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00167**  
 Amount of Each Receipt this Period: 200.00

**C. MR. RICHARD A. ARMSTRONG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 860 PINEGROVE COURT  
 City WHEATON State IL Zip Code 60187-3276  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: RETIRED Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00168**  
 Amount of Each Receipt this Period: 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 510.00  
**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 160 OF 2949 (check only one)
<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES ARNOLD**  
Full Name (Last, First, Middle Initial)

Mailing Address 419 GREEN HILL LANE

City BERWYN State PA Zip Code 19312-1919

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

Name of Employer SELF-EMPLOYED Occupation FINANCIAL PLANNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00169**

Amount of Each Receipt this Period  
 100.00

**B. MR. JAMES ARNOLD**  
Full Name (Last, First, Middle Initial)

Mailing Address 419 GREEN HILL LANE

City BERWYN State PA Zip Code 19312-1919

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

Name of Employer SELF-EMPLOYED Occupation FINANCIAL PLANNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00170**

Amount of Each Receipt this Period  
 100.00

**C. MR. JAMES ARNOLD**  
Full Name (Last, First, Middle Initial)

Mailing Address 419 GREEN HILL LANE

City BERWYN State PA Zip Code 19312-1919

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

Name of Employer SELF-EMPLOYED Occupation FINANCIAL PLANNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00171**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES ROMER ARNOLD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 37320 S. ROCK CREST DRIVE  
 City TUCSON State AZ Zip Code 85739-1183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00172**  
 Amount of Each Receipt this Period 250.00

**B. MR. CHARLES A. ARRINGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6811 WEST 157TH STREET  
 City TINLEY PARK State IL Zip Code 60477-1017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SENIOR ADVISORS OF ILLINOIS Occupation INSURANCE BROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00173**  
 Amount of Each Receipt this Period 70.00

**C. MR. JAMES ARROL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 991 CHALICE COURT  
 City FAIRFIELD State CA Zip Code 94533-1669  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00174**  
 Amount of Each Receipt this Period 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 162 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT C. ARTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 405 EMILY PARK  
 City FAYETTEVILLE State GA Zip Code 30215-6891  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00175**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. ROBERT C. ARTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 405 EMILY PARK  
 City FAYETTEVILLE State GA Zip Code 30215-6891  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00176**  
 Amount of Each Receipt this Period  
 35.00

**C. MR. ROBERT C. ARTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 405 EMILY PARK  
 City FAYETTEVILLE State GA Zip Code 30215-6891  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00177**  
 Amount of Each Receipt this Period  
 26.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 111.00  
**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 163 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT C. ARTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 405 EMILY PARK  
 City FAYETTEVILLE State GA Zip Code 30215-6891  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00178**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. WAYNE ASHBY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 BEL AIR DRIVE  
 City PINEHURST State NC Zip Code 28374-7146  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00179**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. WAYNE ASHBY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 BEL AIR DRIVE  
 City PINEHURST State NC Zip Code 28374-7146  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00180**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 530.00  
**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 164 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ANDREW Y. ASHIKARI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24 WEST PLACE  
 City CHAPPAQUA State NY Zip Code 10514-3615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00181**  
 Amount of Each Receipt this Period  
 220.00

**B. MR. ROBERT E. ASHLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3435 FOX RUN ROAD UNIT 181  
 City SARASOTA State FL Zip Code 34231-7399  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00182**  
 Amount of Each Receipt this Period  
 56.00

**C. MR. ROBERT E. ASHLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3435 FOX RUN ROAD UNIT 181  
 City SARASOTA State FL Zip Code 34231-7399  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00183**  
 Amount of Each Receipt this Period  
 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	331.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN B. ASHMUN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2929 BUFFALO SPEEDWAY  
 APARTMENT 2307  
 City HOUSTON State TX Zip Code 77098-1711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OIL & GAS EXPLORATION PRODUCTION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00184**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. ELEONORE ASLANIAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 SAINT FRANCIS BLVD.  
 City SAN FRANCISCO State CA Zip Code 94127-2026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00185**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. ELEONORE ASLANIAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 SAINT FRANCIS BLVD.  
 City SAN FRANCISCO State CA Zip Code 94127-2026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00186**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	301.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 166 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KATHRINE ATCHLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 617  
 City OLNEY State TX Zip Code 76374-0617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RANCHING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00187**  
 Amount of Each Receipt this Period  
 201.00

**B. CRAIG ATHEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16506 COTUIT CIR  
 City HUNTINGTON BEACH State CA Zip Code 92649-2121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI00188**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. RICHARD ATKINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 2564  
 City PONTE VEDRA State FL Zip Code 32004-2564  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer A.S.C. MEAT IMPORTS Occupation IMPORTER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00189**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 621.00  
**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 167 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD F. ATKINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 277  
 City BAR MILLS State ME Zip Code 04004-0277  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00190**  
 Amount of Each Receipt this Period  
 110.00

**B. MR. FRED B. ATWOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 625 MESSIAH CIRCLE  
 City MECHANICSBURG State PA Zip Code 17055-6174  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00191**  
 Amount of Each Receipt this Period  
 1.00

**C. MS. MARJORIE R. AULD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 415 COLONIAL DRIVE  
 City WEBB CITY State MO Zip Code 64870-1256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00192**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 212.00  
**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 168 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ERWIN K. AULIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2133 N. MAGNOLIA AVENUE  
 UNIT B.  
 City CHICAGO State IL Zip Code 60614-4011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NORTHWOOD INVESTORS Occupation REAL ESTATE INVESTOR/ PRIVATE EQUITY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00193**  
 Amount of Each Receipt this Period  
 32400.00

**B. MS. JAN AUSSICKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 CORNERSTONE DRIVE  
 City TAYLORSVILLE State NC Zip Code 28681-4240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI00194**  
 Amount of Each Receipt this Period  
 50.00

**C. MS. JAN AUSSICKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 CORNERSTONE DRIVE  
 City TAYLORSVILLE State NC Zip Code 28681-4240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00195**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 32550.00  
**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 169 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JAN AUSSICKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 CORNERSTONE DRIVE  
 City TAYLORSVILLE State NC Zip Code 28681-4240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00196**  
 Amount of Each Receipt this Period 101.00

**B. MR. EDMUND AVANESSIANS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3337 WEDGEWOOD LANE  
 City BURBANK State CA Zip Code 91504-1669  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNEMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00197**  
 Amount of Each Receipt this Period 1.00

**C. MR. DON V. AVERITT SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7107 LUPTON DRIVE  
 City DALLAS State TX Zip Code 75225-1736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HAVE ENERGY, INC. Occupation INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00198**  
 Amount of Each Receipt this Period 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 222.00  
**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 170 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALLEN A A. AVERY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1718 LOS PRADOS TRAIL  
 City ARLINGTON State TX Zip Code 76006-6512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AV-TECH INDUSTRIES, INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1060.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00199**  
 Amount of Each Receipt this Period 1000.00

**B. MR. ALLEN A A. AVERY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1718 LOS PRADOS TRAIL  
 City ARLINGTON State TX Zip Code 76006-6512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AV-TECH INDUSTRIES, INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1060.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00200**  
 Amount of Each Receipt this Period 10.00

**C. MR. ALLEN A A. AVERY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1718 LOS PRADOS TRAIL  
 City ARLINGTON State TX Zip Code 76006-6512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AV-TECH INDUSTRIES, INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1060.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00201**  
 Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1035.00  
**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 171 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. IVA AVERY**  
Full Name (Last, First, Middle Initial)

Mailing Address 121 HANSFORD ROAD

City BURNET	State TX	Zip Code 78611-5686
----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2014

**Transaction ID : 2014M04L11AI00202**

Amount of Each Receipt this Period  
200.00

**B. MRS. IVA AVERY**  
Full Name (Last, First, Middle Initial)

Mailing Address 121 HANSFORD ROAD

City BURNET	State TX	Zip Code 78611-5686
----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2014

**Transaction ID : 2014M04L11AI00203**

Amount of Each Receipt this Period  
1.00

**C. DR. BOERJE AXELSSON JOHANSSON**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 472283

City TULSA	State OK	Zip Code 74147-2283
---------------	-------------	------------------------

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

Name of Employer WARREN CLINIC SAINT FRANCIS HEALTH S'	Occupation PHYSICIAN
---	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2014

**Transaction ID : 2014M04L11AI00204**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	251.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 172 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PATRICIA AYCOOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13765 IOWA DRIVE  
 City WARREN State MI Zip Code 48088-3248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00205**  
 Amount of Each Receipt this Period  
 120.00

**B. MRS. HELEN Z. AYERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 724 E. 1000 NORTH ROAD  
 City BEMENT State IL Zip Code 61813-3715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00206**  
 Amount of Each Receipt this Period  
 110.00

**C. MRS. HELEN Z. AYERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 724 E. 1000 NORTH ROAD  
 City BEMENT State IL Zip Code 61813-3715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00207**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 231.00  
**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 173 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES F. AYERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10208 FROG HOLLOW LANE  
 City PETERSBURG State PA Zip Code 16669-2107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00208**  
 Amount of Each Receipt this Period  
 65.00

**B. MR. JAMES F. AYERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10208 FROG HOLLOW LANE  
 City PETERSBURG State PA Zip Code 16669-2107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00209**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. JAMES L. AYERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7942 CASTLE POINTE WAY  
 City PENSACOLA State FL Zip Code 32506-8382  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00210**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	116.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 174 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ABBOTT S. AYLOUSH**

Mailing Address 915 VIA LIDO SOUD

City State Zip Code  
NEWPORT BEACH CA 92663-5534

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00211**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**B. CPT. FRANCIS E. BABINEAU U.S.N. (RE**

Mailing Address 920 LARCHMONT CRESCENT

City State Zip Code  
NORFOLK VA 23508-1434

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00212**

Amount of Each Receipt this Period  
150.00

Full Name (Last, First, Middle Initial)  
**C. MR. DALE R. BABIONE**

Mailing Address 9810 DANSK COURT

City State Zip Code  
FAIRFAX VA 22032-1730

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00213**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 320.00

**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 176 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ELWIN BACON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 991 BEARSDEN ROAD  
 City State Zip Code  
 ATHOL MA 01331-3451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED FARMER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 465.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00217**  
 Amount of Each Receipt this Period  
 125.00

**B. MR. ELWIN BACON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 991 BEARSDEN ROAD  
 City State Zip Code  
 ATHOL MA 01331-3451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED FARMER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 465.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00218**  
 Amount of Each Receipt this Period  
 20.00

**C. MR. HERBERT BACON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2860 DOTTIE LANE  
 APARTMENT A.  
 City State Zip Code  
 GRAND JUNCTION CO 81506-4411  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 740.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00219**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 395.00  
**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 177 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HERBERT BACON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2860 DOTTIE LANE  
 APARTMENT A.  
 City GRAND JUNCTION State CO Zip Code 81506-4411  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 740.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00220**  
 Amount of Each Receipt this Period  
 175.00

**B. MRS. JUNE C. BAEK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20804 NOBLE TER.  
 UNIT 208  
 City POTOMAC FALLS State VA Zip Code 20165-8408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00221**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. NANCY P. BAILEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3620 SPRING VALLEY ROAD  
 City MOUNTAIN BRK State AL Zip Code 35223-1524  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00222**  
 Amount of Each Receipt this Period  
 201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 626.00  
**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 178 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRUCE D. BAILLIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29917 BELLFOUNTAIN ROAD  
 City State Zip Code  
 CORVALLIS OR 97333-9546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00223**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. W. D. BAIN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 307 ESSEX RIDGE COURT  
 City State Zip Code  
 SPARTANBURG SC 29307-1540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI00224**  
 Amount of Each Receipt this Period  
 150.00

**C. MR. KEVIN H. BAINES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 457 SOUTH MSRENGO  
 APT 21  
 City State Zip Code  
 PASADENA CA 91101-3937  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CALTECH/JPL RESEARCH SCIENTIST  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00225**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ARTHUR BAIRD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 EXBURY WAY  
 City HOUSTON State TX Zip Code 77056-2193  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00226**  
 Amount of Each Receipt this Period  
 110.00

**B. MR. ARTHUR W. BAIRD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3160 TIMBER TRAIL  
 City OWENSBORO State KY Zip Code 42303-4472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00227**  
 Amount of Each Receipt this Period  
 30.00

**C. MR. ARTHUR W. BAIRD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3160 TIMBER TRAIL  
 City OWENSBORO State KY Zip Code 42303-4472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00228**  
 Amount of Each Receipt this Period  
 21.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	161.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 180 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DON L. BAIRD**

Mailing Address **8817 SKOKIE LANE**

City **VIENNA** State **VA** Zip Code **22182-2346**

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

Name of Employer **NA** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
**03 / 26 / 2014**  
**Transaction ID : 2014M04L11AI00229**

Amount of Each Receipt this Period  
**400.00**

Full Name (Last, First, Middle Initial)  
**B. MR. HARVEY A. BAIRD**

Mailing Address **216 GRANDVIEW DRIVE**

City **HUDSON** State **WI** Zip Code **54016-5812**

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

Name of Employer **SELF-EMPLOYED** Occupation **ANESTHETIST**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.00**

Date of Receipt  
**03 / 28 / 2014**  
**Transaction ID : 2014M04L11AI00230**

Amount of Each Receipt this Period  
**1.00**

Full Name (Last, First, Middle Initial)  
**C. MR. HARVEY A. BAIRD**

Mailing Address **216 GRANDVIEW DRIVE**

City **HUDSON** State **WI** Zip Code **54016-5812**

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

Name of Employer **SELF-EMPLOYED** Occupation **ANESTHETIST**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.00**

Date of Receipt  
**03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI00231**

Amount of Each Receipt this Period  
**200.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **601.00**

**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 181 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. JERRY BAIRD**

Mailing Address **6745 E. LIBERTY AVENUE**

City **FRESNO** State **CA** Zip Code **93727-5818**

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

Name of Employer **REQUESTED** Occupation **REQUESTED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
**03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI00232**

Amount of Each Receipt this Period  
**120.00**

Full Name (Last, First, Middle Initial)  
**B. MR. CHARLES D. BAKER**

Mailing Address **865 CENTRAL AVENUE (E-204)**

City **NEEDHAM** State **MA** Zip Code **02492-1316**

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

Name of Employer **N/A** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt  
**03 / 12 / 2014**  
**Transaction ID : 2014M04L11AI00233**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. MR. CHARLES D. BAKER**

Mailing Address **865 CENTRAL AVENUE (E-204)**

City **NEEDHAM** State **MA** Zip Code **02492-1316**

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

Name of Employer **N/A** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt  
**03 / 21 / 2014**  
**Transaction ID : 2014M04L11AI00234**

Amount of Each Receipt this Period  
**120.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **290.00**

**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 182 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES D. BAKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 865 CENTRAL AVENUE (E-204)  
 City NEEDHAM State MA Zip Code 02492-1316  
 FEC ID number of contributing federal political committee. C  
 Name of Employer N/A Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 365.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00235**  
 Amount of Each Receipt this Period 75.00

**B. MS. EMMY J. ONEY BAKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1276 MAE ONEY ROAD  
 City HARLETON State TX Zip Code 75651-5268  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 278.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00236**  
 Amount of Each Receipt this Period 120.00

**C. MS. EMMY J. ONEY BAKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1276 MAE ONEY ROAD  
 City HARLETON State TX Zip Code 75651-5268  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 278.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00237**  
 Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 220.00  
**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 183 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. EMMY J. ONEY BAKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1276 MAE ONEY ROAD

City HARLETON State TX Zip Code 75651-5268

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 278.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00238**

Amount of Each Receipt this Period  
 33.00

**B. MS. JANICE BAKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3 LOCHMOOR LANE

City NEWPORT BEACH State CA Zip Code 92660-5214

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

Name of Employer CAROLINA RESTAURANT ENT Occupation RESTAURANT BUSINESS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00239**

Amount of Each Receipt this Period  
 250.00

**C. MR. MARLIN BAKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 305 COLORADO RIVER ROAD

City GEORGETOWN State TX Zip Code 78633-4782

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

Name of Employer PULTE CORPORATION Occupation ADMINISTRATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00240**

Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	483.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 184 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARY L. BAKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1010 PINE VALLEY ROAD  
 City JACKSONVILLE State NC Zip Code 28546-1648  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00241**  
 Amount of Each Receipt this Period 100.00

**B. MR. PAUL RICHARD BAKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1756 ROUTE 23 N.  
 City SALEM State WV Zip Code 26426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00242**  
 Amount of Each Receipt this Period 100.00

**C. MR. ROBERT E. BAKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 360 GORDON ROAD  
 City SABINA State OH Zip Code 45169-9701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00243**  
 Amount of Each Receipt this Period 750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 950.00  
**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 185 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM L. BAKER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 632  
 City SAUGATUCK State MI Zip Code 49453-0632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00244**  
 Amount of Each Receipt this Period  
 120.00

**B. MS. ANGELINA G. BAKKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 113 KEY COLONY COURT  
 City DAYTONA BEACH State FL Zip Code 32118-5650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00245**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. COLLIN R. BAKSE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3229 MASCOUTAH AVENUE  
 City BELLEVILLE State IL Zip Code 62221-8802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation GRAPHIC ARTIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 970.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00246**  
 Amount of Each Receipt this Period  
 750.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD E. BALDOVIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1108 LAVACA STREET  
 SUITE 110-122  
 City AUSTIN State TX Zip Code 78701-2172  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00247**  
 Amount of Each Receipt this Period 600.00

**B. MR. JON B. BALDWIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 N. TAMIAMI TRIAL  
 SUITE 210  
 City SARASOTA State FL Zip Code 34236-5585  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00248**  
 Amount of Each Receipt this Period 201.00

**C. MRS. LARITA R. BALENTINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29165 COUNTY ROAD 358A  
 City BUENA VISTA State CO Zip Code 81211-9632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00249**  
 Amount of Each Receipt this Period 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 921.00  
**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 187 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LARITA R. BALENTINE**  
Full Name (Last, First, Middle Initial)

Mailing Address 29165 COUNTY ROAD 358A

City BUENA VISTA	State CO	Zip Code 81211-9632
---------------------	-------------	------------------------

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

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		13		2014

**Transaction ID : 2014M04L11AI00250**

Amount of Each Receipt this Period  
75.00

**B. MRS. LARITA R. BALENTINE**  
Full Name (Last, First, Middle Initial)

Mailing Address 29165 COUNTY ROAD 358A

City BUENA VISTA	State CO	Zip Code 81211-9632
---------------------	-------------	------------------------

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

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		24		2014

**Transaction ID : 2014M04L11AI00251**

Amount of Each Receipt this Period  
50.00

**C. MR. BARTON M. BALES**  
Full Name (Last, First, Middle Initial)

Mailing Address 460 POPLAR GROVE RD

City KINGSPORT	State TN	Zip Code 37664-5541
-------------------	-------------	------------------------

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

Name of Employer CNH	Occupation SALES MANAGER
-------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		14		2014

**Transaction ID : 2014M04L11AI00252**

Amount of Each Receipt this Period  
265.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	390.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 188 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JOAN V. BALES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 984 ROEDER WAY  
 City SACRAMENTO State CA Zip Code 95822-2300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00253**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. MARIA BALIC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 295 STOCKBRIDGE AVENUE  
 City ATHERTON State CA Zip Code 94027-5444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00254**  
 Amount of Each Receipt this Period  
 250.00

**C. DR. PAUL E. BALLARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 441 EVANS STREET  
 City VICKSBURG State MS Zip Code 39180-5415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation DENTIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00255**  
 Amount of Each Receipt this Period  
 165.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 515.00  
**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 189 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. PAUL E. BALLARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 441 EVANS STREET  
 City VICKSBURG State MS Zip Code 39180-5415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation DENTIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 436.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00256**  
 Amount of Each Receipt this Period 51.00

**B. MR. RALPH THOMPSON BALLARD III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4660 VICTORIA AVENUE APARTMENT 902  
 City RIVERSIDE State CA Zip Code 92507-5652  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00257**  
 Amount of Each Receipt this Period 40.00

**C. MR. RALPH THOMPSON BALLARD III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4660 VICTORIA AVENUE APARTMENT 902  
 City RIVERSIDE State CA Zip Code 92507-5652  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00258**  
 Amount of Each Receipt this Period 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 126.00  
**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 190 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RALPH THOMPSON BALLARD III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4660 VICTORIA AVENUE  
 APARTMENT 902  
 City RIVERSIDE State CA Zip Code 92507-5652  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00259**  
 Amount of Each Receipt this Period 21.00

**B. DR. GALINA BALON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4196 RINCON CIRCLE  
 City PALO ALTO State CA Zip Code 94306-3138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer P. A. W. I. Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00260**  
 Amount of Each Receipt this Period 250.00

**C. MR. THOMAS J. BALOUSEK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16909 JETTON ROAD  
 City CORNELIUS State NC Zip Code 28031-7447  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00261**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 771.00  
**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 191 OF 2949
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MARK BANDIK**

Mailing Address 6317 FRANKLIN DESERT DRIVE

City	State	Zip Code
EL PASO	TX	79912-8160

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

Name of Employer	Occupation
US GOVERNMENT	FEDERAL AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		24		2014

**Transaction ID : 2014M04L11AI00262**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MRS. BERNADENE M. BANE**

Mailing Address P.O. BOX 146

City	State	Zip Code
WOLBACH	NE	68882-0146

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		06		2014

**Transaction ID : 2014M04L11AI00263**

Amount of Each Receipt this Period  
175.00

Full Name (Last, First, Middle Initial)  
**C. MS. LOUISE BANKARD**

Mailing Address 138 BUCKEYE AVENUE NW

City	State	Zip Code
PORT CHARLOTTE	FL	33952-9002

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03		24		2014

**Transaction ID : 2014M04L11AI00264**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	775.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARCELLA F. BANKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1606 DELTA DRIVE  
 City ARLINGTON State TX Zip Code 76012-1720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00265**  
 Amount of Each Receipt this Period  
 101.00

**B. MRS. IRENE E. BANKUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 216 SERENA DRIVE  
 City PALM DESERT State CA Zip Code 92260-2158  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WHITEWATER ROCK & SUPPLY COMPANY Occupation OFFICE MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00266**  
 Amount of Each Receipt this Period  
 110.00

**C. DR. PATRICIA BANWART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 107 W. DIVISION STREET  
 City WEST BEND State IA Zip Code 50597-7738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HEATH SYSTEM Occupation DOCTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00267**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	461.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 193 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ALAN BAPTISTE**

Mailing Address 27420 COUNTRY GLEN ROAD

City State Zip Code  
AGOURA HILLS CA 91301-3536

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00268**

Amount of Each Receipt this Period  
75.00

Full Name (Last, First, Middle Initial)  
**B. MR. CYRIL GRECO BARBACCIA**

Mailing Address 5770 HARWOOD LANE

City State Zip Code  
LOS GATOS CA 95032-5159

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00269**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. MRS. UNA BARBEE**

Mailing Address 501 ENFIELD RD

City State Zip Code  
COLUMBUS OH 43209-2255

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

Name of Employer Occupation  
FINANCE FUND ASSISTANT TO PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00270**

Amount of Each Receipt this Period  
110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5185.00

**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 194 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CONSTANTIN BARBU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6841 ALDERTON STREET  
 City FLUSHING State NY Zip Code 11374-5320  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00271**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. JOHN P. BARCLAY JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 N. LEONARD ROAD  
 City SAINT JOSEPH State MO Zip Code 64506-3119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WIRE ROPE CORP OF AMERICA Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00272**  
 Amount of Each Receipt this Period  
 250.00

**C. MS. DORIS BARDSLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 42 CRANBERRY COURT  
 City RED BANK State NJ Zip Code 07701-6720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00273**  
 Amount of Each Receipt this Period  
 71.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	346.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 195 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEVE BARKLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 PELICAN CIRCLE  
 City STREETMAN State TX Zip Code 75859-3229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00274**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. THOMAS E. BARLOW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 W. BIRCHVIEW DRIVE  
 City SANFORD State MI Zip Code 48657-9201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00275**  
 Amount of Each Receipt this Period  
 40.00

**C. MR. THOMAS E. BARLOW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 W. BIRCHVIEW DRIVE  
 City SANFORD State MI Zip Code 48657-9201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00276**  
 Amount of Each Receipt this Period  
 40.00

**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: PAGE 196 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS E. BARLOW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 W. BIRCHVIEW DRIVE  
 City SANFORD State MI Zip Code 48657-9201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00277**  
 Amount of Each Receipt this Period  
 40.00

**B. MR. THOMAS E. BARLOW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 W. BIRCHVIEW DRIVE  
 City SANFORD State MI Zip Code 48657-9201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00278**  
 Amount of Each Receipt this Period  
 41.00

**C. MR. JOHN BARNA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 122 HEATHER COURT  
 City PALM DESERT State CA Zip Code 92260-6748  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 751.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00279**  
 Amount of Each Receipt this Period  
 750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 831.00  
**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 197 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN BARNA**  
Full Name (Last, First, Middle Initial)

Mailing Address 122 HEATHER COURT

City PALM DESERT State CA Zip Code 92260-6748

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 751.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00280**

Amount of Each Receipt this Period  
 1.00

**B. MR. DAVID N. BARNES**  
Full Name (Last, First, Middle Initial)

Mailing Address 1900 N. UHLE STREET

City ARLINGTON State VA Zip Code 22201-3541

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

Name of Employer I.B.M. CORPORATION Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00281**

Amount of Each Receipt this Period  
 115.00

**C. MRS. JEAN D. BARNES**  
Full Name (Last, First, Middle Initial)

Mailing Address 652 SEDGEWOOD DRIVE

City ROCK HILL State SC Zip Code 29732-2318

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 302.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00282**

Amount of Each Receipt this Period  
 202.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 318.00

**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 198 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. TERRI BARNES**

Mailing Address 2080 ALLENDALE ROAD

City State Zip Code  
MONTGOMERY AL 36111-1018

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

Name of Employer Occupation  
N/A NONE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00283**

Amount of Each Receipt this Period  
400.00

Full Name (Last, First, Middle Initial)  
**B. MS. CAROLINE W. BARNETT**

Mailing Address 3504 CUMMINGS LANE

City State Zip Code  
CHEVY CHASE MD 20815-3236

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00284**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MR. NORMAN BARNETT**

Mailing Address 35 LAZENBY STREET

City State Zip Code  
MONROEVILLE AL 36460-1303

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00285**

Amount of Each Receipt this Period  
201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1101.00

**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 199 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. CHARLES A. BARNHART**

Mailing Address 10622 E. COOPERS HAWK DRIVE

City State Zip Code  
SUN LAKES AZ 85248-7733

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00286**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. MR. CHARLES A. BARNHART**

Mailing Address 10622 E. COOPERS HAWK DRIVE

City State Zip Code  
SUN LAKES AZ 85248-7733

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00287**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**C. MR. RICHARD F. BARNHART**

Mailing Address 4400 STRINGTOWN ROAD

City State Zip Code  
EVANSVILLE IN 47711-2276

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

Name of Employer Occupation  
RETIRED NONE

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  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00288**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 151.00

**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 200 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOSHUA BARNHILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1416 PARKVIEW CIRCLE, #205  
 City WILMINGTON State NC Zip Code 28405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00289**  
 Amount of Each Receipt this Period 250.00

**B. MR. JACK R. BARRETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 913 LAKE VIEW DRIVE  
 City BETHANY BEACH State DE Zip Code 19930-9675  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00290**  
 Amount of Each Receipt this Period 301.00

**C. MRS. JANE BARRETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19300 RIVERSIDE DRIVE  
 City BEVERLY HILLS State MI Zip Code 48025-2951  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00291**  
 Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 701.00  
**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 201 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. PETER BARRETT**

Mailing Address 399 FULLERTON PKWY. #4E

City State Zip Code  
CHICAGO IL 60614-2876

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

Name of Employer Occupation  
STEVE ROE INVESTMENT COUNSEL INVESTMENT COUNSEL

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  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00292**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. STEVEN R. BARRETT**

Mailing Address 2825 W. 113TH COURT

City State Zip Code  
DENVER CO 80234-2679

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

Name of Employer Occupation  
SELF-EMPLOYED AUTO SERVICE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00293**

Amount of Each Receipt this Period  
550.00

Full Name (Last, First, Middle Initial)  
**C. MR. JOHN H. BARRETTE**

Mailing Address 930 25TH PLACE

City State Zip Code  
WISCONSIN RAPIDS WI 54494-3199

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00294**

Amount of Each Receipt this Period  
225.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 875.00

**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 202 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN H. BARRETTE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 930 25TH PLACE  
 City WISCONSIN RAPIDS State WI Zip Code 54494-3199  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00295**  
 Amount of Each Receipt this Period 1.00

**B. MR. PAUL BARRINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14 S. CALIBOGUE CAY ROAD  
 City HILTON HEAD ISLAND State SC Zip Code 29928-2912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COASTAL FOREST RESOURCES Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00296**  
 Amount of Each Receipt this Period 1000.00

**C. MR. JOHN BARRON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 BERKS DRIVE  
 City JOHNSTOWN State PA Zip Code 15905-4802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00297**  
 Amount of Each Receipt this Period 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1121.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PETER F. BARRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7789 CALLE FACIL  
 City SARASOTA State FL Zip Code 34238-4557  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00301**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. RONALD P. BARSANTI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1295 LANDS END ROAD  
 City MANALAPAN State FL Zip Code 33462-4770  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00302**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. RONALD P. BARSANTI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1295 LANDS END ROAD  
 City MANALAPAN State FL Zip Code 33462-4770  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00303**  
 Amount of Each Receipt this Period  
 121.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	341.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 205 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD P. BARSANTI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1295 LANDS END ROAD  
 City State Zip Code  
 MANALAPAN FL 33462-4770  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 242.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00304**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. LEWIS C. BARTEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2921 PALO ALTO DRIVE NE  
 City State Zip Code  
 ALBUQUERQUE NM 87112-2126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED GEOPHYSICIST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 431.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00305**  
 Amount of Each Receipt this Period  
 110.00

**C. MR. LEWIS C. BARTEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2921 PALO ALTO DRIVE NE  
 City State Zip Code  
 ALBUQUERQUE NM 87112-2126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED GEOPHYSICIST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 431.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00306**  
 Amount of Each Receipt this Period  
 111.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 222.00  
**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 206 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. DEBRA BARTELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16291 COUNTESS DRIVE  
 UNIT 105  
 City HUNTINGTON BEACH State CA Zip Code 92649-1930  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ADVERTISING SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00307**  
 Amount of Each Receipt this Period  
 110.00

**B. MR. GERALD D. BARTELS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 739 38 ROAD  
 City FRANKLIN State NE Zip Code 68939-5165  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00308**  
 Amount of Each Receipt this Period  
 206.00

**C. MR. THOMAS BARTHOLET**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12607 HARNEY CIRCLE  
 City OMAHA State NE Zip Code 68154-2316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00309**  
 Amount of Each Receipt this Period  
 3.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	319.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 207 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LAYTON ARCH BARTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 218  
 City ARNETT State OK Zip Code 73832-0218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 801.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00310**  
 Amount of Each Receipt this Period  
 350.00

**B. MR. LAYTON ARCH BARTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 218  
 City ARNETT State OK Zip Code 73832-0218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 801.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00311**  
 Amount of Each Receipt this Period  
 25.00

**C. MR. LAYTON ARCH BARTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 218  
 City ARNETT State OK Zip Code 73832-0218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 801.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00312**  
 Amount of Each Receipt this Period  
 26.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	401.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 208 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LAYTON ARCH BARTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 218  
 City ARNETT State OK Zip Code 73832-0218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 801.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00313**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. LAYTON ARCH BARTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 218  
 City ARNETT State OK Zip Code 73832-0218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 801.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00314**  
 Amount of Each Receipt this Period  
 25.00

**C. MR. JONATHAN BERNARD BASELICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2757 S. GLEBE RD, APT 402  
 APARTMENT 402  
 City ARLINGTON State VA Zip Code 22206-2733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SENATOR RUBIO Occupation LEGISLATIVE ASSISTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00315**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 170.00  
**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 209 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JONATHAN BERNARD BASELICE**

Mailing Address 2757 S. GLEBE RD, APT 402  
APARTMENT 402

City ARLINGTON State VA Zip Code 22206-2733

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

Name of Employer SENATOR RUBIO Occupation LEGISLATIVE ASSISTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt  
**03 / 06 / 2014**

**Transaction ID : 2014M04L11AI00316**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**B. MR. JONATHAN BERNARD BASELICE**

Mailing Address 2757 S. GLEBE RD, APT 402  
APARTMENT 402

City ARLINGTON State VA Zip Code 22206-2733

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

Name of Employer SENATOR RUBIO Occupation LEGISLATIVE ASSISTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt  
**03 / 31 / 2014**

**Transaction ID : 2014M04L11AI00317**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. MR. KEITH J. BASHAW**

Mailing Address 4923 ARDEN FOREST WAY

City TALLAHASSEE State FL Zip Code 32309-2958

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**03 / 11 / 2014**

**Transaction ID : 2014M04L11AI00318**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **200.00**

**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 210 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOSHUA M. BASKIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1601 W. MACARTHUR BLVD.  
APARTMENT 12F

City SANTA ANA State CA Zip Code 92704-8210

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

Name of Employer SELF - EMPLOYED Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00319**

Amount of Each Receipt this Period  
100.00

**B. MR. JOHN A. BAST**  
Full Name (Last, First, Middle Initial)

Mailing Address 1608 MORNING GLORY DRIVE

City HARTFORD State WI Zip Code 53027-9100

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  
03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00320**

Amount of Each Receipt this Period  
120.00

**C. MR. JOHN A. BAST**  
Full Name (Last, First, Middle Initial)

Mailing Address 1608 MORNING GLORY DRIVE

City HARTFORD State WI Zip Code 53027-9100

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  
03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00321**

Amount of Each Receipt this Period  
220.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	440.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 211 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DOROTHY M. BASTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 617 MOELLER AVENUE  
 City CINCINNATI State OH Zip Code 45217-1121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt: **03 / 12 / 2014**  
**Transaction ID : 2014M04L11AI00322**  
 Amount of Each Receipt this Period: **50.00**

**B. MR. CARL F. BASWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1239 N. SCENIC DRIVE  
 City HEBER SPRINGS State AR Zip Code 72543-2111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **420.00**

Date of Receipt: **03 / 26 / 2014**  
**Transaction ID : 2014M04L11AI00323**  
 Amount of Each Receipt this Period: **50.00**

**C. MR. WARREN F. BATEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5119 S.W. 71ST PLACE  
 City MIAMI State FL Zip Code 33155-5639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI00324**  
 Amount of Each Receipt this Period: **150.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 212 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WARREN F. BATEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5119 S.W. 71ST PLACE  
 City MIAMI State FL Zip Code 33155-5639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00325**  
 Amount of Each Receipt this Period 50.00

**B. MR. BRADLEY R. BATES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 3425  
 City CLEBURNE State TX Zip Code 76033-3425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NOLAN RIDGE PROP. MGMT. Occupation PROPERTY MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00326**  
 Amount of Each Receipt this Period 201.00

**C. MR. EARLE S. BATES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 160 KENDAL DRIVE APARTMENT 214  
 City LEXINGTON State VA Zip Code 24450-1791  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00327**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 301.00  
**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 213 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. EARLE S. BATES</b>		Date of Receipt
Mailing Address 160 KENDAL DRIVE APARTMENT 214		<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
LEXINGTON	VA	24450-1791
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI00328</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="616.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. EARLE S. BATES</b>		Date of Receipt
Mailing Address 160 KENDAL DRIVE APARTMENT 214		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
LEXINGTON	VA	24450-1791
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI00329</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="616.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. EARLE S. BATES</b>		Date of Receipt
Mailing Address 160 KENDAL DRIVE APARTMENT 214		<input type="text" value="03"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
LEXINGTON	VA	24450-1791
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI00330</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="51.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="616.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="201.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 214 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GUS BATES III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3404 PARK HOLLOW STREET  
 City FORT WORTH State TX Zip Code 76109-2547  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INSURANCE AGENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00331**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. RAYMOND H. BATES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15 TRINITY ROAD  
 City MARBLEHEAD State MA Zip Code 01945-1023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00332**  
 Amount of Each Receipt this Period  
 70.00

**C. MR. THEODORE W. BATTERMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6911 STATE ROAD 83  
 City HARTLAND State WI Zip Code 53029-8553  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00333**  
 Amount of Each Receipt this Period  
 2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2320.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 215 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CLIFFORD BAUM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4878 KING RICHARD ROAD  
 City JACKSONVILLE State FL Zip Code 32210-7515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00334**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. DAVID S. BAUM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1117  
 City JANESVILLE State WI Zip Code 53547-1117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer S.S.I. TECHNOLOGIES, INC. Occupation C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00335**  
 Amount of Each Receipt this Period  
 32400.00

**C. MR. HERBERT M. BAUM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5223 CENTER STREET  
 City JUPITER State FL Zip Code 33458-4052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 706.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00336**  
 Amount of Each Receipt this Period  
 706.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 34106.00  
**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 216 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PEGGIE BAUMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7860 N. PHEASANT LANE  
 City MILWAUKEE State WI Zip Code 53217-3016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00337**  
 Amount of Each Receipt this Period  
 1000.00

**B. MS. FREDERICA B. BAXTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 215 BELMONT FOREST COURT  
 UNIT 306  
 City LUTHVLE TIMON State MD Zip Code 21093-7820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI00338**  
 Amount of Each Receipt this Period  
 120.00

**C. MS. FREDERICA B. BAXTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 215 BELMONT FOREST COURT  
 UNIT 306  
 City LUTHVLE TIMON State MD Zip Code 21093-7820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00339**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1370.00  
**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 217 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. GERALD BEACHUM**

Mailing Address 236 KINGS GRANT ROAD S.

City LUGOFF                      State SC                      Zip Code 29078-8889

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

Name of Employer INVISTA                      Occupation PROCUREMENT SYSTEMS MANAGER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00340**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**B. MS. SANDRA BEAL**

Mailing Address 20 TARTAN LAKES COURT

City WESTMONT                      State IL                      Zip Code 60559-6159

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

Name of Employer RETIRED                      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00341**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. MR. GEORGE C. BEALS**

Mailing Address 1404 LEWIS RIDGE VIEW

City COLORADO SPRINGS                      State CO                      Zip Code 80907-7141

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

Name of Employer SELF-EMPLOYED                      Occupation REQUESTED

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  
03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00342**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 351.00

**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 218 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HAROLD D. BEALS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 475 N. HICKORY STREET  
 City PLATTEVILLE State WI Zip Code 53818-4001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00343**  
 Amount of Each Receipt this Period  
 140.00

**B. MR. ROBERT H. BEAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1738  
 City ROSWELL State NM Zip Code 88202-1738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ROADRUNNER RANCHES, INC. Occupation RANCH MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00344**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. JOHN N. BEARD JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 TAMASSEE DRIVE  
 City CLEMSON State SC Zip Code 29631-1840  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00345**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 890.00  
**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 219 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT C. BEARD**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1920 GLYNNWOOD DRIVE  
City BARTLESVILLE State OK Zip Code 74006-6213  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF-EMPLOYED Occupation OIL & GAS PRODUCER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00346**  
Amount of Each Receipt this Period 220.00

**B. MR. RICHARD O. BEARE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 91 CORAL DRIVE  
City SEQUIM State WA Zip Code 98382-4736  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00347**  
Amount of Each Receipt this Period 250.00

**C. MR. JAMES BEATTY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 165 12 POINT BUCK TRAIL  
City DURANGO State CO Zip Code 81301-8978  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00348**  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 570.00  
**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 220 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES BEATTY**  
Full Name (Last, First, Middle Initial)

Mailing Address 165 12 POINT BUCK TRAIL

City DURANGO State CO Zip Code 81301-8978

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00349**

Amount of Each Receipt this Period  
 70.00

**B. MR. DEVON E. BECHTEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 12809 C.R. 38

City GOSHEN State IN Zip Code 46528-6959

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

Name of Employer QUALITY DRIVE AWAY Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00350**

Amount of Each Receipt this Period  
 150.00

**C. MS. SANDE STOREY BECK**  
Full Name (Last, First, Middle Initial)

Mailing Address 810 ARDEN CLOSE N.W.

City ATLANTA State GA Zip Code 30327-1281

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00351**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 470.00

**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 221 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DON W. BECKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 507 S. MAIN STREET  
 City MADISON State GA Zip Code 30650-1923  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MARKETING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00352**  
 Amount of Each Receipt this Period  
 250.00

**B. MS. GLORIA S. BECKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 603 FOREST HILL DRIVE  
 City COPPELL State TX Zip Code 75019-6670  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 860.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00353**  
 Amount of Each Receipt this Period  
 750.00

**C. MS. JUDITH MISCHKA BECKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2343 MIRA MAR AVENUE  
 City LONG BEACH State CA Zip Code 90815-1755  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PEGASUS BUILDING SERVICES COMPANY Occupation ADMINISTRATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00354**  
 Amount of Each Receipt this Period  
 375.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1375.00  
**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 223 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. STEVEN C. BEERING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10487 WINDEMERE DRIVE  
 City CARMEL State IN Zip Code 46032-8594  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00358**  
 Amount of Each Receipt this Period  
 250.00

**B. DR. STEVEN C. BEERING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10487 WINDEMERE DRIVE  
 City CARMEL State IN Zip Code 46032-8594  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00359**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. ROYCE L. BEERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2122 S LAKE LEELANAU DR  
 City LAKE LEELANAU State MI Zip Code 49653-9453  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00360**  
 Amount of Each Receipt this Period  
 201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	651.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 224 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARSHA D. BEHRINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7433 N. YUCCA RIDGE ROAD  
 City State Zip Code  
 GLENDORA CA 91741-1828  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 346.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00361**  
 Amount of Each Receipt this Period  
 75.00

**B. MRS. MARSHA D. BEHRINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7433 N. YUCCA RIDGE ROAD  
 City State Zip Code  
 GLENDORA CA 91741-1828  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 346.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00362**  
 Amount of Each Receipt this Period  
 61.00

**C. MAJ. RICHARD C. BEIDLEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 478 ASHLEY PARK  
 City State Zip Code  
 SCHERTZ TX 78154-2638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 USAA INSURANCE CLAIMS ADJUSTER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00363**  
 Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 246.00  
**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 225 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD E. BEIGHTOL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4731 BONITA BAY BLVD  
 City State Zip Code  
 BONITA SPRINGS FL 34134-6718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RG INVESTMENT BANKING PRESIDENT  
 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  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00364**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. WILLIAM C. BEISTLINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 80525  
 City State Zip Code  
 FAIRBANKS AK 99708-0525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 B-ELINECONSTRUNCTION, INC REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00365**  
 Amount of Each Receipt this Period  
 111.00

**C. MR. WILLIAM C. BEISTLINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 80525  
 City State Zip Code  
 FAIRBANKS AK 99708-0525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 B-ELINECONSTRUNCTION, INC REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00366**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 511.00  
**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 226 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. IDA M. BELK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1790 STEENS VERNON ROAD  
 City STEENS State MS Zip Code 39766-9547  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00367**  
 Amount of Each Receipt this Period  
 200.00

**B. MRS. IDA M. BELK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1790 STEENS VERNON ROAD  
 City STEENS State MS Zip Code 39766-9547  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00368**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. DAVID BRYAN BELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2717 HUNTLY LANE  
 City FLOWER MOUND State TX Zip Code 75022-5193  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GOODWILL INDUSTRIES DALLAS Occupation C.O.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00369**  
 Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	311.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 227 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID BRYAN BELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2717 HUNTLY LANE  
 City State Zip Code  
 FLOWER MOUND TX 75022-5193  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 GOODWILL INDUSTRIES DALLAS C.O.O.  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00370**  
 Amount of Each Receipt this Period  
 51.00

**B. MRS. GRACE BELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 809 S. EASTMAN ROAD  
 City State Zip Code  
 LONGVIEW TX 75602-2303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00371**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. ROBERT BELLIVEAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5850 N. PARK STREET  
 City State Zip Code  
 LAS VEGAS NV 89149-2302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00372**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	411.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 228 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RUDY BELTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 505 E. HUNTLAND DRIVE  
 SUITE 530  
 City AUSTIN State TX Zip Code 78752-3760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE DEVELOPMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00373**  
 Amount of Each Receipt this Period  
 32400.00

**B. DR. ARDEN L. BEMENT JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3873 HERON COURT  
 City STOW State OH Zip Code 44224-6199  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00374**  
 Amount of Each Receipt this Period  
 110.00

**C. DR. ARDEN L. BEMENT JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3873 HERON COURT  
 City STOW State OH Zip Code 44224-6199  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00375**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32620.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 229 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. TIMOTHY W. BEMENT</b>		Date of Receipt
Mailing Address P.O. BOX 41		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
COALINGA	CA	93210-0041
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI00376</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	AUTO BODY REPAIR	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="311.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. TIMOTHY W. BEMENT</b>		Date of Receipt
Mailing Address P.O. BOX 41		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
COALINGA	CA	93210-0041
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI00377</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	AUTO BODY REPAIR	<input type="text" value="101.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="311.00"/>	

Full Name (Last, First, Middle Initial) <b>C. BEN ALBERT PARTNERSHIP</b>		Date of Receipt
Mailing Address 4452 ABINADI ROAD		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code
SALT LAKE CITY	UT	84124-4006
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI00378</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="400.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="601.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 230 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. PAUL B DORIUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4452 ABINADI ROAD  
 City State Zip Code  
 SALT LAKE CITY UT 84124-4006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BEN ALBERT PARTNERSHIP PARTNER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 388.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00378M1**  
 Amount of Each Receipt this Period  
 388.00  
**[MEMO ITEM]**  
 PARTNERSHIP ALLOCATION MEMO

**B. DEBORAH DORIUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6188 N 20TH PLACE  
 City State Zip Code  
 PHOENIX AZ 85106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BEN ALBERT PARTNERSHIP PARTNER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 4.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00378M2**  
 Amount of Each Receipt this Period  
 4.00  
**[MEMO ITEM]**  
 PARTNERSHIP ALLOCATION MEMO

**C. DEBORAH DORIUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6188 N 20TH PLACE  
 City State Zip Code  
 PHOENIX AZ 85106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BEN ALBERT PARTNERSHIP PARTNER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 4.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00378M3**  
 Amount of Each Receipt this Period  
 4.00  
**[MEMO ITEM]**  
 PARTNERSHIP ALLOCATION MEMO

**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 231 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DAVID A DORUIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3035 ELK RUN DRIVE  
 City PARK CITY State UT Zip Code 84098  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BEN ALBERT PARTNERSHIP Occupation PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00378M4**  
 Amount of Each Receipt this Period  
 4.00  
**[MEMO ITEM]**  
 PARTNERSHIP ALLOCATION MEMO

**B. MR. DOUGLAS BENACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22 LONGVIEW LANE  
 City CHAPPAQUA State NY Zip Code 10514-1321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GREYSTONE & CO Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00379**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. JUANITA R. BENDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1259 DEERWOOD DRIVE  
 City MIRAMAR BEACH State FL Zip Code 32550-4889  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00380**  
 Amount of Each Receipt this Period  
 215.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	465.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 232 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. NORMA BENESH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 921 E. GRANT AVENUE  
 City EAU CLAIRE State WI Zip Code 54701-6493  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00381**  
 Amount of Each Receipt this Period  
 120.00

**B. MS. NORMA BENESH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 921 E. GRANT AVENUE  
 City EAU CLAIRE State WI Zip Code 54701-6493  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00382**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. BRUCE P. BENGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 91 CARDINAL ROAD  
 City WYOMISSING State PA Zip Code 19610-2517  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00383**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 321.00  
**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 233 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRUCE BENNETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 49 MIDDLE RIVER ROAD  
 City DANBURY State CT Zip Code 06811-4315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BRUCE BENNETT NISSAN Occupation AUTO DEALER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00384**  
 Amount of Each Receipt this Period  
 201.00

**B. MR. EUGENE H. BENNETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1580 CARSON COURT  
 City WENATCHEE State WA Zip Code 98801-6224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00385**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. EUGENE H. BENNETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1580 CARSON COURT  
 City WENATCHEE State WA Zip Code 98801-6224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00386**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	252.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 234 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANK W. BENNETT**  
Full Name (Last, First, Middle Initial)

Mailing Address 960 BEAVER STREET

City SEWICKLEY State PA Zip Code 15143-1748

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00387**

Amount of Each Receipt this Period  
 110.00

**B. MRS. ANGELA D. BENNIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 7 MORGAN TRAIL

City LIVINGSTON State MT Zip Code 59047-8723

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

Name of Employer SCOTTY'S OIL CO., INC. Occupation VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00388**

Amount of Each Receipt this Period  
 250.00

**C. MR. BRENT BENNITT**  
Full Name (Last, First, Middle Initial)

Mailing Address 10 BRIDGETOWN BEND

City CORONADO State CA Zip Code 92118-3258

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00389**

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1360.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 235 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. G. MAURICE BENOIT JR.**

Full Name (Last, First, Middle Initial)  
Mailing Address 5816 MOORS OAKS DRIVE

City MILTON	State FL	Zip Code 32583-2807
----------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation ANESTHESIOLOGIST
-----------------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00390**

Amount of Each Receipt this Period  
250.00

**B. MR. ROBERT W. BENSON**

Full Name (Last, First, Middle Initial)  
Mailing Address 9707 SAN BERNARDINO DRIVE N.E.

City ALBUQUERQUE	State NM	Zip Code 87122-3207
---------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00391**

Amount of Each Receipt this Period  
221.00

**C. MRS. SALLY F. BENTLEY**

Full Name (Last, First, Middle Initial)  
Mailing Address 2606 NW 62ND ST

City OKLAHOMA CITY	State OK	Zip Code 73112-7123
-----------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation EXECUTIVE
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00392**

Amount of Each Receipt this Period  
240.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	711.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 236 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. WENDY WILLIAMS BENTLIF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4920 POST OAK TIMBER DRIVE  
 City HOUSTON State TX Zip Code 77056-2212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00393**  
 Amount of Each Receipt this Period 100.00

**B. MR. HENRY BERCUIT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 266 SUGARBERRY CIRCLE  
 City HOUSTON State TX Zip Code 77024-7211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00394**  
 Amount of Each Receipt this Period 35.00

**C. MR. HENRY BERCUIT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 266 SUGARBERRY CIRCLE  
 City HOUSTON State TX Zip Code 77024-7211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00395**  
 Amount of Each Receipt this Period 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 255.00  
**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 237 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HENRY BERCUIT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 266 SUGARBERRY CIRCLE  
 City HOUSTON State TX Zip Code 77024-7211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00396**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. HENRY BERCUIT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 266 SUGARBERRY CIRCLE  
 City HOUSTON State TX Zip Code 77024-7211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00397**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. HENRY BERCUIT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 266 SUGARBERRY CIRCLE  
 City HOUSTON State TX Zip Code 77024-7211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00398**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 101.00  
**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 238 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. VIRGIL BERDINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5029 PACIFIC GROVE DRIVE  
 City LAS VEGAS State NV Zip Code 89130-2012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00399**  
 Amount of Each Receipt this Period  
 120.00

**B. ELIZABETH P. BERGBOWER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5444 LOYAL DRIVE  
 City BETHLEHEM State PA Zip Code 18017-9479  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00400**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. BRENT C. BERGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2052 E. HERMOSA VISTA DRIVE  
 City MESA State AZ Zip Code 85213-2212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BERGE MAZDA Occupation AUTO DEALER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00401**  
 Amount of Each Receipt this Period  
 730.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1150.00  
**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 239 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. BRYAN BERGERON**

Mailing Address 5000 VALLEY COVE DRIVE SE

City State Zip Code  
OWENS CROSS ROADS AL 35763-9291

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00402**

Amount of Each Receipt this Period  
201.00

Full Name (Last, First, Middle Initial)  
**B. MRS. BEVERLY JEANNE BERGMAN**

Mailing Address P.O. BOX 689

City State Zip Code  
WHITE SD 57276-0689

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00403**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MRS. BEVERLY JEANNE BERGMAN**

Mailing Address P.O. BOX 689

City State Zip Code  
WHITE SD 57276-0689

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00404**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 276.00

**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 240 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. BEVERLY JEANNE BERGMAN**

Mailing Address P.O. BOX 689

City State Zip Code  
WHITE SD 57276-0689

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00405**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT D. BERGMAN**

Mailing Address 609 W. JOSEPHINE STREET

City State Zip Code  
WEATHERFORD TX 76086-4055

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00406**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. MR. BERTIL E. BERGSTROM**

Mailing Address 13949 S. ROSEMARY COURT

City State Zip Code  
PLAINFIELD IL 60544-6342

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
825.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00407**

Amount of Each Receipt this Period  
275.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 575.00

**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 241 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. DR. HANS BERGSTROM</b>		Date of Receipt
Mailing Address 7303 NE 8TH DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 05 / 2014
City	State	Zip Code
BOCA RATON	FL	33487-2422
FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID : <b>2014M04L11AI00408</b>
Name of Employer SELF-EMPLOYED		Amount of Each Receipt this Period
Occupation PROFESSOR/WRITER		5000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	5750.00	

Full Name (Last, First, Middle Initial) <b>B. DR. HANS BERGSTROM</b>		Date of Receipt
Mailing Address 7303 NE 8TH DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014
City	State	Zip Code
BOCA RATON	FL	33487-2422
FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID : <b>2014M04L11AI00409</b>
Name of Employer SELF-EMPLOYED		Amount of Each Receipt this Period
Occupation PROFESSOR/WRITER		750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	5750.00	

Full Name (Last, First, Middle Initial) <b>C. MR. PAUL BERNABUCCI</b>		Date of Receipt
Mailing Address 7226 MAPLE LANE		M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014
City	State	Zip Code
HORACE	ND	58047-4711
FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID : <b>2014M04L11AI00410</b>
Name of Employer REQUESTED		Amount of Each Receipt this Period
Occupation REQUESTED		120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	241.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5870.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 242 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PAUL BERNABUCCI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7226 MAPLE LANE  
 City HORACE State ND Zip Code 58047-4711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00411**  
 Amount of Each Receipt this Period  
 1.00

**B. MS. JANE JOHNSON BERNHARDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 60 CLAVERACH DRIVE  
 City SAINT LOUIS State MO Zip Code 63105-3031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00412**  
 Amount of Each Receipt this Period  
 70.00

**C. MRS. ANGELA M. BERRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6923 MISSION GROVE PARKWAY N.  
 City RIVERSIDE State CA Zip Code 92506-6229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00413**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 571.00  
**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 243 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. CLAUDE A. BERRY**

Mailing Address 321 HICKORY DRIVE

City State Zip Code  
TAHLEQUAH OK 74464-5115

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
691.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00414**

Amount of Each Receipt this Period  
61.00

Full Name (Last, First, Middle Initial)  
**B. MR. CLAUDE A. BERRY**

Mailing Address 321 HICKORY DRIVE

City State Zip Code  
TAHLEQUAH OK 74464-5115

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
691.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00415**

Amount of Each Receipt this Period  
60.00

Full Name (Last, First, Middle Initial)  
**C. DR. DEANE S. BERSON**

Mailing Address 9070 MOUNTAIN ROAD

City State Zip Code  
CASCADE CO 80809-1417

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

Name of Employer Occupation  
BERSON MD DOCTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00416**

Amount of Each Receipt this Period  
126.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 247.00

**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 244 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL C. BERTINOT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 616  
 City ARNAUDVILLE State LA Zip Code 70512-0616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STOCKBOY Occupation LABORER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00417**  
 Amount of Each Receipt this Period  
 30.00

**B. MR. MICHAEL C. BERTINOT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 616  
 City ARNAUDVILLE State LA Zip Code 70512-0616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation LABORER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00418**  
 Amount of Each Receipt this Period  
 45.00

**C. MR. MICHAEL C. BERTINOT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 616  
 City ARNAUDVILLE State LA Zip Code 70512-0616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation LABORER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00419**  
 Amount of Each Receipt this Period  
 36.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 111.00  
**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 245 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROLAND BERTOLINI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4551 SHAW ROAD EXT  
 City AKRON State OH Zip Code 44333-1445  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00420**  
 Amount of Each Receipt this Period  
 211.00

**B. MR. JAMES A. BESAW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 34382 STARBOARD LANTERN  
 City DANA POINT State CA Zip Code 92629-2868  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00421**  
 Amount of Each Receipt this Period  
 500.00

**C. MRS. KATHLEEN A. BEST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 805 S. 173RD COURT APARTMENT 320  
 City OMAHA State NE Zip Code 68118-3115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 861.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00422**  
 Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	731.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 246 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. KATHLEEN A. BEST</b>		Date of Receipt MM / DD / YYYY 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI00423</b>
Mailing Address 805 S. 173RD COURT APARTMENT 320		Amount of Each Receipt this Period 750.00
City OMAHA	State NE	
Zip Code 68118-3115		Aggregate Year-to-Date ▼ 861.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. MRS. KATHLEEN A. BEST</b>		Date of Receipt MM / DD / YYYY 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI00424</b>
Mailing Address 805 S. 173RD COURT APARTMENT 320		Amount of Each Receipt this Period 1.00
City OMAHA	State NE	
Zip Code 68118-3115		Aggregate Year-to-Date ▼ 861.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. MRS. KATHLEEN A. BEST</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI00425</b>
Mailing Address 805 S. 173RD COURT APARTMENT 320		Amount of Each Receipt this Period 20.00
City OMAHA	State NE	
Zip Code 68118-3115		Aggregate Year-to-Date ▼ 861.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	771.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 247 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PHILIP A. BETETTE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 122 TODD AVENUE  
 City LAURENS State SC Zip Code 29360-2626  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00426**  
 Amount of Each Receipt this Period  
 225.00

**B. MRS. CHAR BETTEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1366 OLD OAK HILL DRIVE  
 City ADA State MI Zip Code 49301-9408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 331.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00427**  
 Amount of Each Receipt this Period  
 166.00

**C. MRS. IRMENGARD BETTENDORF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2315 LAKE AVENUE  
 City MIAMI BEACH State FL Zip Code 33140-4539  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00428**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	541.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 248 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HARRY BETTIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 500 W. TEXAS AVENUE  
 SUITE 830  
 City MIDLAND State TX Zip Code 79701-4276  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00429**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. WILLIAM S. BEUTEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 GINGER LAKE DRIVE W.  
 City GLEN CARBON State IL Zip Code 62034-3304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00430**  
 Amount of Each Receipt this Period  
 70.00

**C. MR. JAMES A. BEVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25745 FLORAL COURT  
 City VALENCIA State CA Zip Code 91355-2139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REALTY EXECUTIVES VALENCIA Occupation REALTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00431**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	1190.00
<b>TOTAL</b> This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 249 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARIS BIBELNIEKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 VESEY STREET  
 ROOM 1210  
 City NEW YORK State NY Zip Code 10007-4219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00432**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. MARIS BIBELNIEKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 VESEY STREET  
 ROOM 1210  
 City NEW YORK State NY Zip Code 10007-4219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00433**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. JOYCE A. BICHLMEIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6728 EASTMONT DRIVE  
 City REDDING State CA Zip Code 96002-9663  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00434**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 250 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JOYCE A. BICHLMEIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6728 EASTMONT DRIVE  
 City State Zip Code  
 REDDING CA 96002-9663  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00435**  
 Amount of Each Receipt this Period  
 1.00

**B. MS. BOBBIE BICKERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4303 PAOLI PIKE  
 City State Zip Code  
 FLOYDS KNOBS IN 47119-9659  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00436**  
 Amount of Each Receipt this Period  
 110.00

**C. MS. BETTY BICKHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1004 OVERTON AVENUE  
 City State Zip Code  
 ODESSA TX 79763-3629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 UNEMPLOYED NONE  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00437**  
 Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 146.00  
**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 251 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. ANNIE BIENKO**

Mailing Address P.O. BOX 2

City State Zip Code  
TRANQUILITY NJ 07879-0002

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00438**

Amount of Each Receipt this Period  
211.00

Full Name (Last, First, Middle Initial)  
**B. MS. BARBARA A. BIER**

Mailing Address 306 CAMBRIDGE DRIVE

City State Zip Code  
GIBSONIA PA 15044-7507

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00439**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MR. JAMES M. BIGGAR**

Mailing Address 31600 FAIRMOUNT BLVD.

City State Zip Code  
PEPPER PIKE OH 44124-4816

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

Name of Employer Occupation  
SELF-EMPLOYED REAL ESTATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1130.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00440**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 361.00

**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 252 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. GENE L. BIGGI**

Mailing Address 73179 JOSHUA TREE STREET

City PALM DESERT	State CA	Zip Code 92260-4773
---------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation FOOD PROCESSOR
-----------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00441**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. BARRY BIGGS**

Mailing Address 8806 VERDE OAKS

City UNIVERSAL CITY	State TX	Zip Code 78148-3497
------------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00442**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**C. MR. BARRY BIGGS**

Mailing Address 8806 VERDE OAKS

City UNIVERSAL CITY	State TX	Zip Code 78148-3497
------------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00443**

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	371.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 253 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN BIKOWSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1701 FOX RUN COURT  
 City VIENNA State VA Zip Code 22182-1810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00444**  
 Amount of Each Receipt this Period  
 550.00

**B. DR. GLORIA C. BILES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2110 AMBERLY COURT  
 City HOUSTON State TX Zip Code 77063-1954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00445**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. GREGORY PAUL BILINSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 HERALD OAK COURT  
 City SPRING State TX Zip Code 77381-4830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SPECTRA ENERGY CORPORATION Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00446**  
 Amount of Each Receipt this Period  
 220.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	870.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 254 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE C. BILLINGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 707 OLDE CENTRAL WAY  
 City MOUNT PLEASANT State SC Zip Code 29464-2771  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NUCOR CORPORATION Occupation SALES & MARKETING MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 751.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00447**  
 Amount of Each Receipt this Period  
 251.00

**B. MRS. WALTRAUD A. BING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 WINDMILL ROAD  
 City OAKDALE State NY Zip Code 11769-1817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00448**  
 Amount of Each Receipt this Period  
 221.00

**C. MR. VERNON L. BINGHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1119 ASPEN STREET  
 City BROOMFIELD State CO Zip Code 80020-1435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00449**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	572.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 255 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DEBRA E. BIRD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 39 N. SUNSET DRIVE  
 City State Zip Code  
 WOODBINE NJ 08270-9661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00450**  
 Amount of Each Receipt this Period  
 110.00

**B. MRS. DEBRA E. BIRD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 39 N. SUNSET DRIVE  
 City State Zip Code  
 WOODBINE NJ 08270-9661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00451**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. LAWRENCE LANCASHIRE BIRD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2920 N.E. CONNERS AVENUE  
 SUITE 324  
 City State Zip Code  
 BEND OR 97701-7918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00452**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	310.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 256 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LAWRENCE LANCASHIRE BIRD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2920 N.E. CONNERS AVENUE  
 SUITE 324  
 City BEND State OR Zip Code 97701-7918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00453**  
 Amount of Each Receipt this Period 101.00

**B. MR. DAVID BIRKELAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1228 N. 350 W.  
 City AMERICAN FORK State UT Zip Code 84003-5187  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PHYSICIAN Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00454**  
 Amount of Each Receipt this Period 55.00

**C. MR. DAVID BIRKELAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1228 N. 350 W.  
 City AMERICAN FORK State UT Zip Code 84003-5187  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ENGINEER Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00455**  
 Amount of Each Receipt this Period 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	206.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 257 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JANICE E. BIRKELAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 509 ROUTE 530  
 APARTMENT 166  
 City WHITING State NJ Zip Code 08759-3147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00456**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. GENEVIEVE BISHOP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10230 EDELWEISS CIRCLE  
 City SHAWNEE MISSION State KS Zip Code 66203-4611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00457**  
 Amount of Each Receipt this Period  
 200.00

**C. MRS. GEORGE P. BISSELL JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4031 KENNETT PIKE #70  
 City GREENVILLE State DE Zip Code 19807-2033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1505.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00458**  
 Amount of Each Receipt this Period  
 470.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1170.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 258 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM BISSEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8305 SOBAX DRIVE  
 City INDIANAPOLIS State IN Zip Code 46268-1731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00459**  
 Amount of Each Receipt this Period 101.00

**B. MR. F. GORDON BITTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3100 W. RAY ROAD SUITE 301  
 City CHANDLER State AZ Zip Code 85226-2473  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ISOLA GROUP S.A.R.L. Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00460**  
 Amount of Each Receipt this Period 500.00

**C. MRS. ILAH M. BJELLA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 305 HARRISBURG DRIVE  
 City ENCINITAS State CA Zip Code 92024-4216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00461**  
 Amount of Each Receipt this Period 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1101.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 259 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ILAH M. BJELLA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 305 HARRISBURG DRIVE  
 City ENCINITAS State CA Zip Code 92024-4216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00462**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. RICHARD K. BJORNSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3216 HACKBERRY STREET  
 City BISMARCK State ND Zip Code 58503-0238  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00463**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. RICHARD K. BJORNSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3216 HACKBERRY STREET  
 City BISMARCK State ND Zip Code 58503-0238  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00464**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	301.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 260 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. CHARLES BLACK III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4728 AIRPORT BLVD.  
 SUITE C.  
 City MOBILE State AL Zip Code 36608-3149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ORAL SURGEON  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00465**  
 Amount of Each Receipt this Period  
 500.00

**B. MS. CONNIE ADELE BLACK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 736  
 City JUNE LAKE State CA Zip Code 93529-0736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation SMALL BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00466**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. JOHN R. BLACK III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6465 NORTHPORT DRIVE  
 City DALLAS State TX Zip Code 75230-4110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00467**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1250.00  
**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 261 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KARL BAIN BLACK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15133 RANGEWORTH COURT  
 City HUNTERSVILLE State NC Zip Code 28078-9777  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KEWAUNEE SCIENTIFIC CORPORATION Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00468**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. KARL BAIN BLACK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15133 RANGEWORTH COURT  
 City HUNTERSVILLE State NC Zip Code 28078-9777  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KEWAUNEE SCIENTIFIC CORPORATION Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI00469**  
 Amount of Each Receipt this Period  
 50.00

**C. MS. KATHRYN B. BLACK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 365 WINDSOR DRIVE N.  
 City OXFORD State MS Zip Code 38655-7092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00470**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 262 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. KATHRYN B. BLACK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 365 WINDSOR DRIVE N.  
 City OXFORD State MS Zip Code 38655-7092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00471**  
 Amount of Each Receipt this Period 1.00

**B. MR. GARY M. BLACKBURN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23881 VIA FABRICANTE SUITE 506  
 City MISSION VIEJO State CA Zip Code 92691-3139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00472**  
 Amount of Each Receipt this Period 250.00

**C. MRS. MARY BLACKBURN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3061 COPA DE ORO DRIVE  
 City LOS ALAMITOS State CA Zip Code 90720-5210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00473**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 451.00  
**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 263 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY BLACKBURN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3061 COPA DE ORO DRIVE  
 City LOS ALAMITOS State CA Zip Code 90720-5210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00474**  
 Amount of Each Receipt this Period  
 50.00

**B. MRS. MARY BLACKBURN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3061 COPA DE ORO DRIVE  
 City LOS ALAMITOS State CA Zip Code 90720-5210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00475**  
 Amount of Each Receipt this Period  
 101.00

**C. MRS. HENRIETTA BLACKMON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 699  
 City CAMDEN State AL Zip Code 36726-0699  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00476**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 251.00  
**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 264 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. HENRIETTA BLACKMON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 699

City CAMDEN	State AL	Zip Code 36726-0699
----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00477**

Amount of Each Receipt this Period  
 100.00

**B. DR. RICHARD E. BLACKWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1407 SMOLIAN PLACE

City BIRMINGHAM	State AL	Zip Code 35205-2931
--------------------	-------------	------------------------

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

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00478**

Amount of Each Receipt this Period  
 100.00

**C. DR. RICHARD E. BLACKWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1407 SMOLIAN PLACE

City BIRMINGHAM	State AL	Zip Code 35205-2931
--------------------	-------------	------------------------

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

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00479**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 265 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. RICHARD E. BLACKWELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1407 SMOLIAN PLACE

City BIRMINGHAM State AL Zip Code 35205-2931

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00480**

Amount of Each Receipt this Period  
 101.00

**B. MS. ARLAND OLGA BLADES**  
Full Name (Last, First, Middle Initial)

Mailing Address 913 WOODLAND TRACE COURT

City WINSTON SALEM State NC Zip Code 27104-3490

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

Name of Employer UNEMPLOYED Occupation UNEMPLOYED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI00481**

Amount of Each Receipt this Period  
 20.00

**C. MR. RALPH BLADES JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 301 W. WALNUT APARTMENT 501

City CHANUTE State KS Zip Code 66720-1664

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00482**

Amount of Each Receipt this Period  
 112.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 233.00

**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 266 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BONNIE BLAIR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14878 W. PICCADILLY ROAD  
 City State Zip Code  
 GOODYEAR AZ 85395-8834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 METRO COMMERCIAL PROPERTIES SENIOR PROPERTY MANAGER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00483**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. ROSE V. BLAIR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 S. OCEAN BLVD.  
 City State Zip Code  
 PALM BEACH FL 33480-4420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00484**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. ROSE V. BLAIR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 S. OCEAN BLVD.  
 City State Zip Code  
 PALM BEACH FL 33480-4420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00485**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00  
**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 267 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. RUTH CARYL BLAIR**

Mailing Address **264 ARGONNE AVENUE**

City State Zip Code  
**LONG BEACH CA 90803-1763**

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

Name of Employer Occupation  
**HOMEMAKER HOMEMAKER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**220.00**

Date of Receipt  
**03 / 13 / 2014**

**Transaction ID : 2014M04L11AI00486**

Amount of Each Receipt this Period  
**220.00**

Full Name (Last, First, Middle Initial)  
**B. MR. BERNARD SHIELDS BLAKE JR.**

Mailing Address **4605 TOMAHAWK TRAIL S.E.**

City State Zip Code  
**DECATUR AL 35603-5150**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**261.00**

Date of Receipt  
**03 / 03 / 2014**

**Transaction ID : 2014M04L11AI00487**

Amount of Each Receipt this Period  
**10.00**

Full Name (Last, First, Middle Initial)  
**C. MR. BERNARD SHIELDS BLAKE JR.**

Mailing Address **4605 TOMAHAWK TRAIL S.E.**

City State Zip Code  
**DECATUR AL 35603-5150**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**261.00**

Date of Receipt  
**03 / 04 / 2014**

**Transaction ID : 2014M04L11AI00488**

Amount of Each Receipt this Period  
**30.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **260.00**

**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 268 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. BERNARD SHIELDS BLAKE JR.</b>		Date of Receipt
Mailing Address 4605 TOMAHAWK TRAIL S.E.		M M M / D D D / Y Y Y Y Y Y 03 / 13 / 2014
City	State	Zip Code
DECATUR	AL	35603-5150
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI00489</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	261.00	

Full Name (Last, First, Middle Initial) <b>B. MR. BERNARD SHIELDS BLAKE JR.</b>		Date of Receipt
Mailing Address 4605 TOMAHAWK TRAIL S.E.		M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014
City	State	Zip Code
DECATUR	AL	35603-5150
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI00490</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	261.00	

Full Name (Last, First, Middle Initial) <b>C. MR. BERNARD SHIELDS BLAKE JR.</b>		Date of Receipt
Mailing Address 4605 TOMAHAWK TRAIL S.E.		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City	State	Zip Code
DECATUR	AL	35603-5150
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI00491</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	261.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 269 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BERNARD SHIELDS BLAKE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4605 TOMAHAWK TRAIL S.E.  
 City DECATUR State AL Zip Code 35603-5150  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00492**  
 Amount of Each Receipt this Period  
 11.00

**B. MR. BERNARD SHIELDS BLAKE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4605 TOMAHAWK TRAIL S.E.  
 City DECATUR State AL Zip Code 35603-5150  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00493**  
 Amount of Each Receipt this Period  
 10.00

**C. MR. MILES G. BLAKESLEE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2255 RIDGE ROAD  
 City NORTH HAVEN State CT Zip Code 06473-1216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 471.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00494**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	121.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 270 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MILES G. BLAKESLEE JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 2255 RIDGE ROAD

City NORTH HAVEN State CT Zip Code 06473-1216

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 471.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00495**

Amount of Each Receipt this Period  
 1.00

**B. MR. DAN S. BLALOCK**  
Full Name (Last, First, Middle Initial)

Mailing Address 5262 S.W. 24TH DRIVE

City GAINESVILLE State FL Zip Code 32608-3969

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00496**

Amount of Each Receipt this Period  
 250.00

**C. MR. WILLIAM ROBERT BLAND**  
Full Name (Last, First, Middle Initial)

Mailing Address 404 CAPITOL LANDING ROAD

City WILLIAMSBURG State VA Zip Code 23185-4317

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00497**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 501.00

**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 272 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PHILLIS BLASCHE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25617 ASH ROAD  
 City BARSTOW State CA Zip Code 92311-3508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00501**  
 Amount of Each Receipt this Period 120.00

**B. MR. DAVID H. BLATTNER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23764 COUNTY ROAD 12  
 City RICHMOND State MN Zip Code 56368-8355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BLATTNER & SONS, INC. Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00502**  
 Amount of Each Receipt this Period 1000.00

**C. MR. HAROLD W. BLAUER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 608 W. 21ST STREET  
 City BURLEY State ID Zip Code 83318-2216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00503**  
 Amount of Each Receipt this Period 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1121.00  
**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 273 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES E. BLEAKLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8101 MISSION ROAD  
 APARTMENT 107  
 City PRAIRIE VILLAGE State KS Zip Code 66208-5245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00504**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. JOHN F. BLEDSOE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 823 GARRETT COURT  
 City WINTER PARK State FL Zip Code 32792-2913  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00505**  
 Amount of Each Receipt this Period  
 100.00

**C. DR. ROBERT P. BLEREAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3020 LAKE PALOURDE DRIVE  
 City MORGAN CITY State LA Zip Code 70380-1562  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00506**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	230.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 274 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. K. E. BLESSING**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 758

City MORETOWN State VT Zip Code 05660-0758

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00507**

Amount of Each Receipt this Period  
 301.00

**B. MRS. EMILY BLISS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1307 TROON WAY

City ROCKLEDGE State FL Zip Code 32955-2244

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00508**

Amount of Each Receipt this Period  
 204.00

**C. MR. HOWARD M. BLOCH**  
Full Name (Last, First, Middle Initial)

Mailing Address 11018 WHITEHAWK STREET

City PLANTATION State FL Zip Code 33324-2176

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

Name of Employer RETIRED Occupation RETIRED

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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00509**

Amount of Each Receipt this Period  
 750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1255.00

**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 275 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARTIN BLOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19314 FOXTREE LANE  
 City HOUSTON State TX Zip Code 77094-3441  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00510**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. OSCAR C. BLOMGREN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6262 S.E. TORY PLACE  
 City HOBE SOUND State FL Zip Code 33455-7338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00511**  
 Amount of Each Receipt this Period  
 400.00

**C. MR. RICHARD V. BLOMSTROM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 2972  
 City SPRINGFIELD State MA Zip Code 01101-2972  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00512**  
 Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 810.00  
**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 276 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. COE BLOOMBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1026 EL MEDEO  
 City PACIFIC PALISADES State CA Zip Code 90272-2419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00513**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. JAMES A. BLOOMFIELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14000 SE 45TH COURT  
 City BELLEVUE State WA Zip Code 98006-2341  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00514**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. LESTER G. BLOUNT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2691 E. 500 N.  
 City HARTFORD CITY State IN Zip Code 47348-9235  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 541.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00515**  
 Amount of Each Receipt this Period  
 221.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	422.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 277 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DUANE BLUEMKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 245 SEA GULL AVENUE  
 City VERO BEACH State FL Zip Code 32960-4258  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00516**  
 Amount of Each Receipt this Period  
 2000.00

**B. MR. ANDREW M. BLUM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 410 PARK AVENUE  
 16TH FLOOR  
 City NEW YORK State NY Zip Code 10022-4407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00517**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. ARTHUR M. BOAL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4550 E. CHERRY CREEK SOUTH DRIVE  
 APARTMENT 1400  
 City DENVER State CO Zip Code 80246-1543  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 426.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00518**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 278 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ARTHUR M. BOAL**  
Full Name (Last, First, Middle Initial)

Mailing Address 4550 E. CHERRY CREEK SOUTH DRIVE  
APARTMENT 1400

City DENVER State CO Zip Code 80246-1543

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
426.00

Date of Receipt  
03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00519**

Amount of Each Receipt this Period  
101.00

**B. MR. BRUCE DEWAYNE BOARDMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 128 HIDDEN CANYON COVE

City DRIFTWOOD State TX Zip Code 78619-4346

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

Name of Employer HAY COUNTY Occupation POLICE OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00520**

Amount of Each Receipt this Period  
250.00

**C. MRS. LOUISE JEAN BOCHSLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 41210 KINGSTON LYONS DRIVE

City STAYTON State OR Zip Code 97383-9708

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

Name of Employer NORTH SANTIAM PAVEMENT COMPANY Occupation ROAD CONSTRUCTION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00521**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	851.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 279 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JEROLD BOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 OLYMPIA DRIVE  
 City ROCHESTER State NY Zip Code 14615-1205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00522**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. JEROLD BOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 OLYMPIA DRIVE  
 City ROCHESTER State NY Zip Code 14615-1205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00523**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JOHN W. BOCKHAHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 118  
 City BUFFALO State NY Zip Code 14220-0118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00524**  
 Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 280 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARGARET M. BOCKRATH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 921 CEDAR POINT ROAD  
 City SANDUSKY State OH Zip Code 44870-5230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00525**  
 Amount of Each Receipt this Period 500.00

**B. MR. REX BODA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3632 WONDERLAND PARK LANE  
 City KISSIMMEE State FL Zip Code 34746-7275  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 561.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00526**  
 Amount of Each Receipt this Period 251.00

**C. MR. JOHN BODINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 113 BELL FARM ESTATES  
 City SEWICKLEY State PA Zip Code 15143-8367  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ONDEMAND ENERGY Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00527**  
 Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1751.00  
**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 281 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TODD BOEHLY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 865 HOLLOW TREE RIDGE ROAD  
 City DARIEN State CT Zip Code 06820-3217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GUGGENHEIM PARTNERS L.L.C. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **32400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00528**  
 Amount of Each Receipt this Period  
**32400.00**

**B. JEAN A. BOGARTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2113 COX ROAD  
 City JARRETTSVILLE State MD Zip Code 21084-1132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI00529**  
 Amount of Each Receipt this Period  
**400.00**

**C. MRS. WILLENE BOGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 404 LOMAX COVE  
 City AUSTIN State TX Zip Code 78732-2482  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00530**  
 Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>33800.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 282 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PORTIA S. BOGCESS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 671 S. OCEAN BOULEVARD  
 City BOCA RATON State FL Zip Code 33432-6220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00531**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. WILLIAM T.R. BOGLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10328 HAWLEY ROAD  
 City EL CAJON State CA Zip Code 92021-2530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer L-3 D. P. A. Occupation V. P. TRAINING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00532**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. WILLIAM T.R. BOGLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10328 HAWLEY ROAD  
 City EL CAJON State CA Zip Code 92021-2530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer L-3 D. P. A. Occupation V. P. TRAINING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00533**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 351.00  
**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 283 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM T.R. BOGLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 10328 HAWLEY ROAD

City EL CAJON State CA Zip Code 92021-2530

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

Name of Employer L-3 D. P. A. Occupation V. P. TRAINING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00534**

Amount of Each Receipt this Period  
 100.00

**B. MR. RICHARD BOHLEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 5022 OAK KNOLL LANE

City FRISCO State TX Zip Code 75034-4072

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00535**

Amount of Each Receipt this Period  
 250.00

**C. DR. JIMMY C. BOLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 1106 HIGH VISTA LN

City RICHARDSON State TX Zip Code 75080-1520

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00536**

Amount of Each Receipt this Period  
 450.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LARRY G. BOLTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10861 BARTON STREET  
 City OVERLAND PARK State KS Zip Code 66210-1261  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00537**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. LOIS B. BOND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 824 AUBURN DRIVE  
 City SIKESTON State MO Zip Code 63801-5728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00538**  
 Amount of Each Receipt this Period  
 75.00

**C. MRS. LOIS B. BOND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 824 AUBURN DRIVE  
 City SIKESTON State MO Zip Code 63801-5728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00539**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 285 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT W. BOND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5109 STONEY CREEK DRIVE  
 City State Zip Code  
 RAPID CITY SD 57702-9261  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00540**  
 Amount of Each Receipt this Period  
 400.00

**B. MRS. DORIS BONIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 905 BLUE RIDGE DRIVE  
 City State Zip Code  
 STAUNTON VA 24401-9101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 895.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00541**  
 Amount of Each Receipt this Period  
 265.00

**C. MRS. NANCY BOOKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6801 W. 82ND STREET  
 City State Zip Code  
 BLOOMINGTON MN 55438-1264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00542**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 765.00  
**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 286 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAN W. BOONE III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4123 SPRING ISLAND  
 204 SPRING ISLAND DRIVE  
 City OKATIE State SC Zip Code 29909-4041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00543**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. DAN W. BOONE III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4123 SPRING ISLAND  
 204 SPRING ISLAND DRIVE  
 City OKATIE State SC Zip Code 29909-4041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00544**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. MICHAEL C. BOONE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 533 CHICKAMAW ROAD  
 City LECOMPTE State LA Zip Code 71346-9537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00545**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1600.00  
**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 287 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. DR. RICHARD BOORTZ-MARX</b>		Date of Receipt
Mailing Address 4911 STOCKTON WAY		M M M / D D D / Y Y Y Y Y Y 03 / 18 / 2014
City	State	Zip Code
DURHAM	NC	27707-9091
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI00546
C		Amount of Each Receipt this Period
		225.00
Name of Employer	Occupation	
DUKE UNIVERSITY	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	225.00	

Full Name (Last, First, Middle Initial) <b>B. MR. HENRY G. BOOTH</b>		Date of Receipt
Mailing Address 28 BAYNARD PARK ROAD		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City	State	Zip Code
HILTON HEAD ISLAND	SC	29928-4116
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI00547
C		Amount of Each Receipt this Period
		251.00
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	251.00	

Full Name (Last, First, Middle Initial) <b>C. MR. RUSSELL L. BORAAS</b>		Date of Receipt
Mailing Address 15483 GREENWOOD CHURCH ROAD		M M M / D D D / Y Y Y Y Y Y 03 / 11 / 2014
City	State	Zip Code
MONTPELIER	VA	23192-2717
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI00548
C		Amount of Each Receipt this Period
		250.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	726.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 288 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ARMANDO BORGES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15139 CORDARY AVE  
 City LAWNDALE State CA Zip Code 90260-2313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation AUTOMOTIVE REPAIR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00549**  
 Amount of Each Receipt this Period  
 70.00

**B. MR. ARMANDO BORGES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15139 CORDARY AVE  
 City LAWNDALE State CA Zip Code 90260-2313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation AUTOMOTIVE REPAIR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00550**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. JEAN BORLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4731 COMPASS DRIVE  
 City BRADENTON State FL Zip Code 34208-8494  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00551**  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 270.00  
**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 289 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ADRIENNE E. BOROFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1728 CAMINITO BALATA  
 City SAN DIEGO State CA Zip Code 92128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt: **03 / 04 / 2014**  
**Transaction ID : 2014M04L11AI00552**  
 Amount of Each Receipt this Period: **1000.00**

**B. MR. PIER C. BORRA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 181 4TH AVENUE N.  
 City NAPLES State FL Zip Code 34102-8421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt: **03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI00553**  
 Amount of Each Receipt this Period: **2000.00**

**C. DR. TOMI L. BORTOLAZZO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 3269  
 City MAMMOTH LAKES State CA Zip Code 93546-3269  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **SELF-EMPLOYED** Occupation: **MEDICAL DOCTOR**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt: **03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI00554**  
 Amount of Each Receipt this Period: **250.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **3250.00**  
**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 290 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARIO BORTOLI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4429 LEHIGHTON DOWNS DRIVE  
 City State Zip Code  
 ROCKFORD IL 61101-6075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00555**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. MARIO BORTOLI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4429 LEHIGHTON DOWNS DRIVE  
 City State Zip Code  
 ROCKFORD IL 61101-6075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00556**  
 Amount of Each Receipt this Period  
 101.00

**C. MISS BONNIE BORTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1551 HAUSMAN ROAD  
 City State Zip Code  
 ALLENTOWN PA 18104-9258  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00557**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 222.00  
**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 291 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EUGENE T. BOSE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2931 TEAKWOOD LANDING DRIVE  
 City SELLERSBURG State IN Zip Code 47172-8500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00558**  
 Amount of Each Receipt this Period  
 150.00

**B. MR. BAYARD E. BOSSERMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 304 N. 7TH AVENUE  
 City IOWA CITY State IA Zip Code 52245-6002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00559**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. JOHN A. BOSTROM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1516 WILSON AVENUE  
 City MENOMONIE State WI Zip Code 54751-2968  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00560**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 292 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM LESLIE BOTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9975 LEES CREEK ROAD  
 City HARRISON State OH Zip Code 45030-9514  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00561**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. JOHN TAYLOR BOTTOMLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 COTTON FARM LANE  
 City NORTH HAMPTON State NH Zip Code 03862-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE FULLER FOUNDATIONS Occupation EXECUTIVE DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00562**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. ROGER M. BOUGIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 MIDDLEFIELD DRIVE  
 City WEST HARTFORD State CT Zip Code 06107-1245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00563**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 620.00  
**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 293 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD A. BOULDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 634 10TH STREET  
 City OAKMONT State PA Zip Code 15139-1143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00564**  
 Amount of Each Receipt this Period 160.00

**B. MRS. EMILY BOUWMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4754 CHARLESTON COURT  
 City HOLLAND State MI Zip Code 49423-8719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00565**  
 Amount of Each Receipt this Period 250.00

**C. MR. DOUGLAS A. BOVEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26913 DIAMONDHEAD LANE  
 City RANCHO PALOS VERDES State CA Zip Code 90275-3726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00566**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 510.00  
**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 294 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DOUGLAS A. BOVEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26913 DIAMONDHEAD LANE  
 City RANCHO PALOS VERDES State CA Zip Code 90275-3726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00567**  
 Amount of Each Receipt this Period 101.00

**B. MR. PETER BOWE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 437 W. NORTH AVENUE APARTMENT 603  
 City CHICAGO State IL Zip Code 60610-1830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ELLICOTT DREDGES L.L.C. Occupation PRESIDENT/EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 16200.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00568**  
 Amount of Each Receipt this Period 16200.00

**C. MRS. BETTY W. BOWES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5503 WALLACE DRIVE  
 City GREENSBORO State NC Zip Code 27407-7255  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LEATHER DIRECT L.L.C. Occupation LEATHER UPHOLSTERED FURNITURE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00569**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 16551.00  
**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 295 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. LEYDA E. BOWES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3659 SOUTH MIAMI AVENUE  
 SUITE 6008  
 City MIAMI State FL Zip Code 33133-4221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LEYDA E. BOWES, M.D., P.A. Occupation PHYSICIAN  
 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  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00570**  
 Amount of Each Receipt this Period  
 300.00

**B. MRS. SHIRLEY BOWIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12222 N. GUINEVERE DRIVE  
 City SPOKANE State WA Zip Code 99218-1726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00571**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. HAROLD T. BOWLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3335 DONA ROSA DRIVE  
 City STUDIO CITY State CA Zip Code 91604-4343  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00572**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1401.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 296 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD G. BOWLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10170 BIRCH BLUFF LANE  
 City LAS VEGAS State NV Zip Code 89145-8821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00573**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. RONALD G. BOWLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10170 BIRCH BLUFF LANE  
 City LAS VEGAS State NV Zip Code 89145-8821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00574**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. BEVERLY BOWMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4555 E. 46TH STREET  
 City DES MOINES State IA Zip Code 50317-4720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00575**  
 Amount of Each Receipt this Period  
 165.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 315.00  
**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 297 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. STEPHANIE BOWMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8155 WOODBERRY BLVD.  
 City CHAGRIN FALLS State OH Zip Code 44023-4533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00576**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. WILLARD D. BOWMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 114  
 City FAIRFIELD State KY Zip Code 40020-0114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00577**  
 Amount of Each Receipt this Period  
 101.00

**C. VINAL BOWYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2539 S. WILLOW CREEK DRIVE  
 City PERU State IN Zip Code 46970-7202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00578**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	451.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 298 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. VINAL BOWYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2539 S. WILLOW CREEK DRIVE  
 City PERU State IN Zip Code 46970-7202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00579**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. AUGUSTUS SHAPLEIGH BOYD III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8508 S.W. 84TH LOOP  
 City Ocala State FL Zip Code 34481-7208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00580**  
 Amount of Each Receipt this Period  
 70.00

**C. DR. WANDA T. BOYD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29589 NELSON MTN RD  
 City ALBEMARLE State NC Zip Code 28001-7559  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00581**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	270.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 299 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM J. BOYD**  
Full Name (Last, First, Middle Initial)

Mailing Address 2118 S. UNION AVENUE  
APARTMENT 11

City TACOMA State WA Zip Code 98405-1032

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00582**

Amount of Each Receipt this Period  
250.00

**B. MR. GEORGE K. BOYER**  
Full Name (Last, First, Middle Initial)

Mailing Address 37 QUANADUCK ROAD

City STONINGTON State CT Zip Code 06378-2914

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.00

Date of Receipt  
03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00583**

Amount of Each Receipt this Period  
50.00

**C. MR. GEORGE K. BOYER**  
Full Name (Last, First, Middle Initial)

Mailing Address 37 QUANADUCK ROAD

City STONINGTON State CT Zip Code 06378-2914

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.00

Date of Receipt  
03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00584**

Amount of Each Receipt this Period  
1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 301.00

**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 300 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ISABEL O. BOYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4600 BOWLING BLVD.  
 APARTMENT 101  
 City LOUISVILLE State KY Zip Code 40207-5155  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00585**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. ROBERT J. BOYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4428 HOLLOW OAK DRIVE  
 City DALLAS State TX Zip Code 75287-6849  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer S. J. A. BROKER, INC. Occupation INSURANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00586**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. DANIEL H. BOYKIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1057 KIPLING COURT  
 City CONCORD State CA Zip Code 94518-1752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNION BANK Occupation BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00587**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1350.00  
**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 301 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. DOROTHY BOYLAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1200 N. FOX CUB HOLLOW  
 City GLEN MILLS State PA Zip Code 19342-2229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 442.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00588**  
 Amount of Each Receipt this Period 222.00

**B. MS. CHELSEA BOYLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 REGATTA COURT  
 City RIDGELEY State WV Zip Code 26753-5013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ANCHOR REHABILITATION Occupation C.O.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00589**  
 Amount of Each Receipt this Period 250.00

**C. MRS. NITA BOYUM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5661 BUSCH DRIVE  
 City MALIBU State CA Zip Code 90265-3803  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00590**  
 Amount of Each Receipt this Period 400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	872.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 302 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. MELBRA BOZONE</b>		Date of Receipt
Mailing Address 208 METHODIST STREET		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
RED OAK	TX	75154-6326
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI00591</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MRS. MELBRA BOZONE</b>		Date of Receipt
Mailing Address 208 METHODIST STREET		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
RED OAK	TX	75154-6326
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI00592</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="120.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MRS. MELBRA BOZONE</b>		Date of Receipt
Mailing Address 208 METHODIST STREET		<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
RED OAK	TX	75154-6326
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI00593</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="170.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 303 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT BRADFORD**  
Full Name (Last, First, Middle Initial)  
Mailing Address 435 E. 52ND STREET  
City NEW YORK State NY Zip Code 10022-6445  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF-EMPLOYED Occupation PRODUCER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 270.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00594**  
Amount of Each Receipt this Period 135.00

**B. MRS. LORRETTA BRADLEY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1143 SPRING GLEN COURT  
City LELAND State NC Zip Code 28451-9119  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00595**  
Amount of Each Receipt this Period 110.00

**C. MRS. LORRETTA BRADLEY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1143 SPRING GLEN COURT  
City LELAND State NC Zip Code 28451-9119  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00596**  
Amount of Each Receipt this Period 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 246.00  
**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 304 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EUGENE B. BRADSHAW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 977 CHICKADEE DRIVE  
 City VENICE State FL Zip Code 34285-6618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00597**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. EUGENE B. BRADSHAW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 977 CHICKADEE DRIVE  
 City VENICE State FL Zip Code 34285-6618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00598**  
 Amount of Each Receipt this Period  
 121.00

**C. MRS. DONNA Q. BRADY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12656 NORTH 84TH PLACE  
 City SCOTTSDALE State AZ Zip Code 85260-5317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00599**  
 Amount of Each Receipt this Period  
 241.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 482.00  
**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 305 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FLOYD H. BRAGG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 443 RIVER ROAD  
 SUITE 210  
 City HIGHLAND PARK State NJ Zip Code 08904-1916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00600**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. JUDITH C. BRANAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 231 HILLSIDE DRIVE  
 City JASPER State IN Zip Code 47546-3431  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00601**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. HAROLD L. BRANDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4224 E. PRAIRIE LANE COURT  
 City SPOKANE State WA Zip Code 99223-6025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00602**  
 Amount of Each Receipt this Period  
 301.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 601.00  
**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 306 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DENNIS K. BRANOFF**

Mailing Address 1231 HILLWOOD CIRCLE

City EAST LANSING      State MI      Zip Code 48823-2276

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

Name of Employer WEIGHT WATCHERS      Occupation MARKETING

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI00603**

Amount of Each Receipt this Period  
40.00

Full Name (Last, First, Middle Initial)  
**B. MR. DENNIS K. BRANOFF**

Mailing Address 1231 HILLWOOD CIRCLE

City EAST LANSING      State MI      Zip Code 48823-2276

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

Name of Employer WEIGHT WATCHERS      Occupation MARKETING

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00604**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MR. CURTIS BRANTLEY**

Mailing Address 2731 DEVANDRENE AVENUE

City WAYCROSS      State GA      Zip Code 31503-8677

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

Name of Employer REQUESTED      Occupation REQUESTED

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  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00605**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 240.00

**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 307 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. NOLAN BRANTON</b>		Date of Receipt 03 / 13 / 2014 <b>Transaction ID : 2014M04L11AI00606</b>
Mailing Address 553 BROADWAY EXT. N.		Amount of Each Receipt this Period 200.00
City GREENVILLE	State MS	Zip Code 38703-9747
FEC ID number of contributing federal political committee. C		
Name of Employer TRI DELTA PECAN, INC.	Occupation AGRIBUSINESS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) <b>B. MR. JOHN G. BRANZ</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI00607</b>
Mailing Address 198 JEANETTE STREET P.O. BOX 575		Amount of Each Receipt this Period 1.00
City HERSCHER	State IL	Zip Code 60941-5009
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.00	

Full Name (Last, First, Middle Initial) <b>C. MS. JOYCE BRATHWAITE</b>		Date of Receipt 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI00608</b>
Mailing Address 17050 S. PARK BLVD. SHAKER HEIGHTS		Amount of Each Receipt this Period 25.00
City CLEVELAND	State OH	Zip Code 44120-1644
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	226.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 308 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JOYCE BRATHWAITE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17050 S. PARK BLVD.  
 SHAKER HEIGHTS  
 City CLEVELAND State OH Zip Code 44120-1644  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00609**  
 Amount of Each Receipt this Period  
 25.00

**B. MS. JOYCE BRATHWAITE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17050 S. PARK BLVD.  
 SHAKER HEIGHTS  
 City CLEVELAND State OH Zip Code 44120-1644  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00610**  
 Amount of Each Receipt this Period  
 26.00

**C. MS. JOYCE BRATHWAITE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17050 S. PARK BLVD.  
 SHAKER HEIGHTS  
 City CLEVELAND State OH Zip Code 44120-1644  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00611**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	76.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 309 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENNETH E. BRATNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13731 HICKMAN ROAD  
 APARTMENT 3107  
 City URBANDALE State IA Zip Code 50323-2290  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00612**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. CREED V. BRATTAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 530 FIR KNOLL LANE N.E.  
 City SALEM State OR Zip Code 97317-3367  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BRATTAIN INTERNATIONAL TRUCKS Occupation CHAIRMAN & C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 472.65

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00613**  
 Amount of Each Receipt this Period  
 128.70

**C. MR. KURT BRATTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24 LANCASTER ROAD  
 City NORTH ANDOVER State MA Zip Code 01845-2147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE BRICKMAN GROUP Occupation SENIOR VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00614**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	479.70
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 310 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. LISA M. BRATTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24 LANCASTER ROAD  
 City NORTH ANDOVER State MA Zip Code 01845-2147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NA Occupation STUDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00615**  
 Amount of Each Receipt this Period  
 101.00

**B. MR. GEORGE A. BRAUN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 122 ESPARTA WAY  
 City SANTA MONICA State CA Zip Code 90402-2136  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00616**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. ROGER BRAUN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 607 WEST AVENUE  
 City NORTON State KS Zip Code 67654-1225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00617**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 801.00  
**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 311 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROGER BRAUN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 607 WEST AVENUE  
 City NORTON State KS Zip Code 67654-1225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00618**  
 Amount of Each Receipt this Period  
 15.00

**B. MR. JAMES BRAUNSCHEIDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 41777 PURPOSE WAY  
 City ALDIE State VA Zip Code 20105-2551  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S.A.F. Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00619**  
 Amount of Each Receipt this Period  
 150.00

**C. DR. NACHMAN BRAUTBAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10808 ASHTON AVE  
 City LOS ANGELES State CA Zip Code 90024-5025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N BRAUTBAR M.D INC Occupation MEDICAL DOCTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI00620**  
 Amount of Each Receipt this Period  
 100.00

**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 312 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. NACHMAN BRAUTBAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10808 ASHTON AVE  
 City State Zip Code  
 LOS ANGELES CA 90024-5025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N BRAUTBAR M.D INC MEDICAL DOCTOR  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00621**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. EDDIE LAMAR BRAXTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6415 GREENLAND ROAD  
 City State Zip Code  
 JACKSONVILLE FL 32258-2437  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ORTESA INDUSTRIAL CONTRACTORS BUSINESS OWNER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00621**  
 Amount of Each Receipt this Period  
 500.00

**C. MRS. EDNA BRAXTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10009 WESTERLY LANE  
 City State Zip Code  
 FORT WASHINGTON MD 20744-3969  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00623**  
 Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	620.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 313 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. EDNA BRAXTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 10009 WESTERLY LANE

City FORT WASHINGTON State MD Zip Code 20744-3969

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00624**

Amount of Each Receipt this Period  
 50.00

**B. MRS. EDNA BRAXTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 10009 WESTERLY LANE

City FORT WASHINGTON State MD Zip Code 20744-3969

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00625**

Amount of Each Receipt this Period  
 25.00

**C. MR. PHILIP E. BREAUULT**  
Full Name (Last, First, Middle Initial)

Mailing Address 880 W SUNSET DR

City REDLANDS State CA Zip Code 92373-6938

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

Name of Employer CAL DISPOSAL CO Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00626**

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	575.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 314 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL BRECHAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 303  
 City KODIAK State AK Zip Code 99615-0303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LOSH CORPORATION Occupation CORPORATE EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00627**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. ALAN BREED**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 34 ROCK RIDGE AVENUE  
 City GREENWICH State CT Zip Code 06831-4441  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RIDGEWOOD MANAGEMENT Occupation INVESTMENT MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00628**  
 Amount of Each Receipt this Period  
 32400.00

**C. MR. ROBERT H. BREEDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1112 GREENS VIEW DRIVE  
 City WOOSTER State OH Zip Code 44691-2666  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00629**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 32950.00  
**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 315 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. BEAMER BREILING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3233 PARKVIEW COURT S.E.  
 City CEDAR RAPIDS State IA Zip Code 52403-1913  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation SURGEON  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00630**  
 Amount of Each Receipt this Period 1.00

**B. MR. PAUL D. BREITHAAPT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2025 SWAN DRIVE  
 City COSTA MESA State CA Zip Code 92626-4741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00631**  
 Amount of Each Receipt this Period 100.00

**C. JERRIE BREMERMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1550 2ND STREET APARTMENT 8H  
 City NEW ORLEANS State LA Zip Code 70130-5943  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INTIRIOR DESIGN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00632**  
 Amount of Each Receipt this Period 125.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 226.00  
**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 316 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. HELEN K. BREMNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4967 S. E. LOST LAKE WAY  
 City HOBE SOUND State FL Zip Code 33455-8116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00633**  
 Amount of Each Receipt this Period  
 125.00

**B. MRS. JOAN E. BRENGEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18106 SE VILLAGE CIRCLE  
 City TEQUESTA State FL Zip Code 33469-1795  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00634**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. DAVID BRENNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 MALLARD COURT  
 City GREENVILLE State SC Zip Code 29617-6139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00635**  
 Amount of Each Receipt this Period  
 225.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 317 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. GLENDA KAY BREWER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 313 EAST ELM STREET  
 City TAYLORVILLE State IL Zip Code 62568-1505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1120.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00636**  
 Amount of Each Receipt this Period  
 1120.00

**B. MR. JOHN M. BREWER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 LAKE OGLETHORPE DRIVE  
 City ARNOLDSVILLE State GA Zip Code 30619-2204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNIVERSITY OF GEORGIA Occupation PROFESSOR OF BIOCHEMISTRY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00637**  
 Amount of Each Receipt this Period  
 200.00

**C. MRS. RUTH B. BRICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9460 S.W. BRENTWOOD PLACE  
 City TIGARD State OR Zip Code 97224-5630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00638**  
 Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1350.00  
**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 318 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. RUTH B. BRICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9460 S.W. BRENTWOOD PLACE  
 City TIGARD State OR Zip Code 97224-5630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **201.00**

Date of Receipt: **03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI00639**  
 Amount of Each Receipt this Period: **35.00**

**B. MRS. RUTH B. BRICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9460 S.W. BRENTWOOD PLACE  
 City TIGARD State OR Zip Code 97224-5630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **201.00**

Date of Receipt: **03 / 19 / 2014**  
**Transaction ID : 2014M04L11AI00640**  
 Amount of Each Receipt this Period: **25.00**

**C. MRS. RUTH B. BRICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9460 S.W. BRENTWOOD PLACE  
 City TIGARD State OR Zip Code 97224-5630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **201.00**

Date of Receipt: **03 / 21 / 2014**  
**Transaction ID : 2014M04L11AI00641**  
 Amount of Each Receipt this Period: **25.00**

**SUBTOTAL** of Receipts This Page (optional)..... **85.00**  
**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 319 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. RUTH B. BRICE**  
Full Name (Last, First, Middle Initial)

Mailing Address 9460 S.W. BRENTWOOD PLACE

City TIGARD State OR Zip Code 97224-5630

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

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**

**Transaction ID : 2014M04L11AI00642**

Amount of Each Receipt this Period  
**30.00**

**B. MRS. RUTH B. BRICE**  
Full Name (Last, First, Middle Initial)

Mailing Address 9460 S.W. BRENTWOOD PLACE

City TIGARD State OR Zip Code 97224-5630

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

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : 2014M04L11AI00643**

Amount of Each Receipt this Period  
**1.00**

**C. MR. WILLIAM BRICKLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 60 BARSTOW AVENUE

City NORWELL State MA Zip Code 02061-2832

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

Name of Employer: **FIDELITY INVESTMENTS** Occupation: **FINANCIAL SERVICES**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **505.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 17 / 2014**

**Transaction ID : 2014M04L11AI00644**

Amount of Each Receipt this Period  
**245.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **276.00**

**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 320 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BLAINE A. BRIGGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1969 LANCEWOOD LANE  
 City CARLSBAD State CA Zip Code 92009-6826  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00645**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. BLAINE A. BRIGGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1969 LANCEWOOD LANE  
 City CARLSBAD State CA Zip Code 92009-6826  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00646**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. PHILIP BRIGGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 36896 N. 104TH PLACE  
 City SCOTTSDALE State AZ Zip Code 85262-4063  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00647**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 321 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. GLADYS BRINKLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 95  
 City PRITCHETT State CO Zip Code 81064-0095  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **545.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 11 / 2014**  
**Transaction ID : 2014M04L11AI00648**  
 Amount of Each Receipt this Period  
**30.00**

**B. MRS. GLADYS BRINKLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 95  
 City PRITCHETT State CO Zip Code 81064-0095  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **545.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 11 / 2014**  
**Transaction ID : 2014M04L11AI00649**  
 Amount of Each Receipt this Period  
**35.00**

**C. MRS. GLADYS BRINKLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 95  
 City PRITCHETT State CO Zip Code 81064-0095  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **545.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI00650**  
 Amount of Each Receipt this Period  
**30.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **95.00**  
**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 322 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. GLADYS BRINKLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 95  
 City State Zip Code  
 PRITCHETT CO 81064-0095  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 545.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00651**  
 Amount of Each Receipt this Period  
 30.00

**B. MS. BONNIE LEAH BRINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1618  
 City State Zip Code  
 PERRY GA 31069-1618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PHYSICIAN  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1326.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00652**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. BONNIE LEAH BRINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1618  
 City State Zip Code  
 PERRY GA 31069-1618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PHYSICIAN  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1326.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00653**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 230.00  
**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 323 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. BONNIE LEAH BRINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1618  
 City PERRY State GA Zip Code 31069-1618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1326.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00654**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. BONNIE LEAH BRINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1618  
 City PERRY State GA Zip Code 31069-1618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1326.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00655**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. BONNIE LEAH BRINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1618  
 City PERRY State GA Zip Code 31069-1618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1326.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00656**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 301.00  
**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 324 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TERRY BRISCOE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7217 S. WOELFEL ROAD  
 City FRANKLIN State WI Zip Code 53132-1941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00657**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. ROBERT A. BRITTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6110 N. OCEAN BOULEVARD #17  
 City OCEAN RIDGE State FL Zip Code 33435-5200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00658**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. LEE C. BROAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 174 SMALLWOOD DRIVE  
 City AMHERST State NY Zip Code 14226-4034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation CONSULTANT  
 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  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00659**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	720.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 326 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. SHIRLEY A. BROD</b>		Date of Receipt
Mailing Address 25 BARCELONA DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 04 / 2014
City	State	Zip Code
BOULDER	CO	80303-4901
FEC ID number of contributing federal political committee.	C	<b>Transaction ID : 2014M04L11AI00663</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	120.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	220.00	

Full Name (Last, First, Middle Initial) <b>B. MR. DWIGHT BROEMAN JR.</b>		Date of Receipt
Mailing Address 2041 EDENDERRY DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 05 / 2014
City	State	Zip Code
FORT MITCHELL	KY	41017-4464
FEC ID number of contributing federal political committee.	C	<b>Transaction ID : 2014M04L11AI00664</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	REQUESTED	100.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	235.00	

Full Name (Last, First, Middle Initial) <b>C. MR. DWIGHT BROEMAN JR.</b>		Date of Receipt
Mailing Address 2041 EDENDERRY DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014
City	State	Zip Code
FORT MITCHELL	KY	41017-4464
FEC ID number of contributing federal political committee.	C	<b>Transaction ID : 2014M04L11AI00665</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	REQUESTED	135.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	235.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	355.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 327 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KATHY BROGHAMMER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4520 W. MADERO DR.  
 City MEQUON State WI Zip Code 53092-8714  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LUMEN CHRISTI CATHOLIC SCHOOL Occupation SUBSTITUTE TEACHER PART TIME  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00666**  
 Amount of Each Receipt this Period  
 51.00

**B. MRS. JANET E. BROMLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 323 BRADLEY FOSTER DRIVE  
 City HUNTINGTON State WV Zip Code 25701-9451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00667**  
 Amount of Each Receipt this Period  
 50.00

**C. STEVEN BRONKAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8395 HEARTHWAY AVE  
 City JENISON State MI Zip Code 49428-9181  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00668**  
 Amount of Each Receipt this Period  
 400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 501.00  
**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 328 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS BROOKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4522 CEDARFIELD ROAD  
 City KATY State TX Zip Code 77494-3378  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00669**  
 Amount of Each Receipt this Period  
 30.00

**B. MR. THOMAS BROOKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4522 CEDARFIELD ROAD  
 City KATY State TX Zip Code 77494-3378  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00670**  
 Amount of Each Receipt this Period  
 35.00

**C. MR. S. M. BROOKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 550  
 City NASH State TX Zip Code 75569-0550  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TEXANA TANK CAR & MANUFACTURING, LTI Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00671**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 185.00  
**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 329 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. S. M. BROOKS**

Mailing Address P.O. BOX 550

City NASH State TX Zip Code 75569-0550

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

Name of Employer TEXANA TANK CAR & MANUFACTURING, LTI Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **241.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI00672**

Amount of Each Receipt this Period  
**1.00**

Full Name (Last, First, Middle Initial)  
**B. RICK BROOM**

Mailing Address 785 CYPRESS TRAILS DRIVE

City TARPON SPRINGS State FL Zip Code 34688-9047

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

Name of Employer RESOURCE SOLUTIONS TAMPA, INC. Occupation OWNER/PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI00673**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**C. MR. RONALD E. BROTHERS**

Mailing Address 1700 DALTON ROAD

City PALOS VERDES ESTATES State CA Zip Code 90274-1837

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1460.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 03 / 2014**  
**Transaction ID : 2014M04L11AI00674**

Amount of Each Receipt this Period  
**140.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>391.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 330 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD E. BROTHERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1700 DALTON ROAD

City PALOS VERDES ESTATES	State CA	Zip Code 90274-1837
------------------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1460.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : 2014M04L11AI00675**

Amount of Each Receipt this Period  
150.00

**B. MR. RONALD E. BROTHERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1700 DALTON ROAD

City PALOS VERDES ESTATES	State CA	Zip Code 90274-1837
------------------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1460.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2014

**Transaction ID : 2014M04L11AI00676**

Amount of Each Receipt this Period  
140.00

**C. MR. RONALD E. BROTHERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1700 DALTON ROAD

City PALOS VERDES ESTATES	State CA	Zip Code 90274-1837
------------------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1460.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2014

**Transaction ID : 2014M04L11AI00677**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	390.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 331 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALBERT C. BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17783 W. SPENCER DRIVE  
 City SURPRISE State AZ Zip Code 85374-1919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00678**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. ALBERT C. BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17783 W. SPENCER DRIVE  
 City SURPRISE State AZ Zip Code 85374-1919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00679**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. DAVID S. J. BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2999 38TH STREET N.W.  
 City WASHINGTON State DC Zip Code 20016-5402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00680**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1320.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 332 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD RUTHERFORD BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8600 SKYLINE DRIVE  
 APARTMENT 1115  
 City DALLAS State TX Zip Code 75243-4169  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00681**  
 Amount of Each Receipt this Period  
 110.00

**B. MR. EVAN BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1614 N. APPLE VALLEY DRIVE  
 City APPLE VALLEY State UT Zip Code 84737-4827  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00682**  
 Amount of Each Receipt this Period  
 125.00

**C. MR. EVAN BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1614 N. APPLE VALLEY DRIVE  
 City APPLE VALLEY State UT Zip Code 84737-4827  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00683**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 355.00  
**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

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EVAN BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1614 N. APPLE VALLEY DRIVE  
 City State Zip Code  
 APPLE VALLEY UT 84737-4827  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED FARMER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00684**  
 Amount of Each Receipt this Period  
 11.00

**B. MR. FORD BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1865 VINE STREET  
 City State Zip Code  
 DENVER CO 80206-1121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00685**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. GLENN A. BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3212 WHITNEY LANE  
 City State Zip Code  
 BURBANK CA 91504-1645  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00686**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1112.00  
**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 334 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HAROLD D. BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1400 POLY DRIVE  
 APARTMENT 7E  
 City BILLINGS State MT Zip Code 59102-8304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00687**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. JAMES W. BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2971 JUNIPER LANE  
 City TUSCALOOSA State AL Zip Code 35405-2754  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TRILWILL CORP Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00688**  
 Amount of Each Receipt this Period  
 100.00

**C. DR. JASON W. BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 66 EAST 79TH STREET  
 City NEW YORK State NY Zip Code 10075-0244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00689**  
 Amount of Each Receipt this Period  
 2001.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2351.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 335 OF 2949  
(check only one)  
 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN D. BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 121  
 City TUCKER State GA Zip Code 30085-0121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00690**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. KEVIN BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 142  
 City CLEVELAND State MN Zip Code 56017-0142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00691**  
 Amount of Each Receipt this Period  
 210.00

**C. MR. LARRY W. BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7062 GATTON SQUARE  
 City ALEXANDRIA State VA Zip Code 22315-5168  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00692**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 560.00  
**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 336 OF 2949  
(check only one)  
 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARJORIE BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8000 A.1.A. S.  
 UNIT 305  
 City SAINT AUGUSTINE State FL Zip Code 32080-2911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00693**  
 Amount of Each Receipt this Period  
 101.00  
 Aggregate Year-to-Date ▼  
 201.00

**B. MS. MARY D. BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 350  
 City ROSS State CA Zip Code 94957-0350  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **RETIRED** Occupation **RETIRED**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00694**  
 Amount of Each Receipt this Period  
 250.00  
 Aggregate Year-to-Date ▼  
 250.00

**C. MR. MIKE BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1560 COUNTY ROAD 428  
 City STEPHENVILLE State TX Zip Code 76401-7815  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **RETIRED** Occupation **RETIRED**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00695**  
 Amount of Each Receipt this Period  
 100.00  
 Aggregate Year-to-Date ▼  
 255.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 451.00  
**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

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 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MILDRED S. BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 254  
 City LAURENS State SC Zip Code 29360-0254  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00696**  
 Amount of Each Receipt this Period  
 15.00

**B. MRS. MILDRED S. BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 254  
 City LAURENS State SC Zip Code 29360-0254  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00697**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. OSCIE O. BROWN III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1000 ASBURY DRIVE  
 City COLUMBIA State SC Zip Code 29209-2113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SCANA Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00698**  
 Amount of Each Receipt this Period  
 206.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 471.00  
**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 338 OF 2949  
(check only one)  
 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PATRICIA BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6730 S. GRANITE AVENUE  
 City TULSA State OK Zip Code 74136-7035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI00699**  
 Amount of Each Receipt this Period  
 1500.00

**B. MR. PAUL GRIFFETH BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29710 NIAGARA COURT  
 City ENGLEWOOD State FL Zip Code 34223-3971  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00700**  
 Amount of Each Receipt this Period  
 30.00

**C. MR. R. RODERICK BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 79 HEMENWAY ROAD  
 City FRAMINGHAM State MA Zip Code 01701-2617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00701**  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1680.00  
**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 339 OF 2949  
(check only one)  
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 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. R. RODERICK BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 79 HEMENWAY ROAD  
 City State Zip Code  
 FRAMINGHAM MA 01701-2617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 825.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00702**  
 Amount of Each Receipt this Period  
 120.00

**B. DR. ROBERT W. BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4100 CLARKE AVENUE  
 City State Zip Code  
 FORT WORTH TX 76107-2407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00703**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. ROBINSON S. BROWN III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3600 WOODSIDE ROAD  
 City State Zip Code  
 LOUISVILLE KY 40222-5963  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00704**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 321.00  
**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 340 OF 2949  
(check only one)  
 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROY MERRITT BROWN III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12805 WALLINGFORD DRIVE  
 City TAMPA State FL Zip Code 33624-6358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer S.B.S. ASSOCIATES, INC. Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00705**  
 Amount of Each Receipt this Period 250.00

**B. MRS. SHIRLEY BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4720 MERWIN STREET  
 City HOUSTON State TX Zip Code 77027-6608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00706**  
 Amount of Each Receipt this Period 110.00

**C. MR. STEPHEN R. BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10021 N. ALDER SPRING DRIVE  
 City ORO VALLEY State AZ Zip Code 85737-8592  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PERFORMANCE ASSOCIATES INTERNATION Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00707**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 460.00  
**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 341 OF 2949  
(check only one)  
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 597 TOPEKA LANE  
 City VACAVILLE State CA Zip Code 95687-4353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI00708**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. THOMAS BROWN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 HAVEN DRIVE  
 City FORT SMITH State AR Zip Code 72901-6842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00709**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. THOMAS BROWN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 HAVEN DRIVE  
 City FORT SMITH State AR Zip Code 72901-6842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00710**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 470.00  
**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

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(check only one)  
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM G. BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 177 N. 400 W.  
 City State Zip Code  
 GENOLA UT 84655-5097  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED FARMER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00711**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. ROY W. BROWNE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 499 S. LONG AVENUE  
 City State Zip Code  
 HARTVILLE MO 65667-8213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00712**  
 Amount of Each Receipt this Period  
 1.00

**C. MS. DORIS M. BROWNING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 291 FLEMING DRIVE  
 City State Zip Code  
 FLEMING ISLAND FL 32003-9326  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00713**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 241.00  
**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 343 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. DORIS M. BROWNING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 291 FLEMING DRIVE  
 City FLEMING ISLAND State FL Zip Code 32003-9326  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00714**  
 Amount of Each Receipt this Period 1.00

**B. MR. ROBERT SCOTT BROWNING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10123 N WABASH AVE  
 City KANSAS CITY State MO Zip Code 64155-2965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00715**  
 Amount of Each Receipt this Period 110.00

**C. MR. ROBERT SCOTT BROWNING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10123 N WABASH AVE  
 City KANSAS CITY State MO Zip Code 64155-2965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00716**  
 Amount of Each Receipt this Period 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	221.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 344 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SMITH BROWNLIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 301 COMMERCE STREET  
 SUITE 3655  
 City FORT WORTH State TX Zip Code 76102-4130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00717**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. ROBERT BROYLES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4140 RANIER COURT  
 City FORT WORTH State TX Zip Code 76109-5025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PETROLEUM GEOPHYSICIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5001.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00718**  
 Amount of Each Receipt this Period  
 5001.00

**C. MR. R. T. BRUCE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4215 BOXWOOD DRIVE  
 City DENTON State TX Zip Code 76208-7300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00719**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5301.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 345 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. R. T. BRUCE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4215 BOXWOOD DRIVE  
 City DENTON State TX Zip Code 76208-7300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00720**  
 Amount of Each Receipt this Period  
 35.00

**B. MR. R. T. BRUCE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4215 BOXWOOD DRIVE  
 City DENTON State TX Zip Code 76208-7300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00721**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. RONALD L. BRUCE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3671 OVERLAND DRIVE  
 City PENSACOLA State FL Zip Code 32504-7532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 551.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00722**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ► 156.00  
**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 346 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD L. BRUCE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3671 OVERLAND DRIVE  
 City PENSACOLA State FL Zip Code 32504-7532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 551.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00723**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. RONALD L. BRUCE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3671 OVERLAND DRIVE  
 City PENSACOLA State FL Zip Code 32504-7532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 551.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00724**  
 Amount of Each Receipt this Period  
 51.00

**C. MR. DENNIS L. BRUDERLY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2980 ASHWOOD DRIVE  
 City ALLIANCE State OH Zip Code 44601-8650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00725**  
 Amount of Each Receipt this Period  
 111.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 347 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DENNIS L. BRUDERLY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2980 ASHWOOD DRIVE  
 City ALLIANCE State OH Zip Code 44601-8650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00726**  
 Amount of Each Receipt this Period 100.00

**B. MR. PHILLIP BRUMMEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3941 TAMIAMI TRAIL #3157 PMB 123  
 City PUNTA GORDA State FL Zip Code 33950-7925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer B.K.D., L.L.P. Occupation C.P.A.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00727**  
 Amount of Each Receipt this Period 1000.00

**C. DR. DEBRA L. BRUNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 42 GARFIELD AVENUE  
 City NORWOOD State PA Zip Code 19074-1419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SOMERDALE SCHOOL DISTRICT Occupation SUPERINTENDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00728**  
 Amount of Each Receipt this Period 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 348 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CLARENCE A. BRUNKHORST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1603 WEST 36TH STREET  
 City KEARNEY State NE Zip Code 68845-2744  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00729**  
 Amount of Each Receipt this Period 50.00

**B. MR. JAMES D. BRUNS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 299  
 City CUBA State MO Zip Code 65453-0299  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00730**  
 Amount of Each Receipt this Period 20.00

**C. MR. JAMES D. BRUNS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 299  
 City CUBA State MO Zip Code 65453-0299  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00731**  
 Amount of Each Receipt this Period 30.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 100.00  
**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 349 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES D. BRUNS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 299  
 City CUBA State MO Zip Code 65453-0299  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00732**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. JAMES D. BRUNS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 299  
 City CUBA State MO Zip Code 65453-0299  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00732**  
 Amount of Each Receipt this Period  
 51.00

**C. MRS. KAREN L. BRUNS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1941 BURKETTSVILLE SAINT HEN ROAD  
 City SAINT HENRY State OH Zip Code 45883-9712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WEIGHT WATCHERS Occupation LEADER  
 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  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00734**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	376.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 350 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. VIVIAN BRUNS**

Mailing Address 3701 LA TERRAZA DRIVE

City State Zip Code  
SIERRA VISTA AZ 85650-6892

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00735**

Amount of Each Receipt this Period  
265.00

Full Name (Last, First, Middle Initial)  
**B. MRS. BETTY BRUNSTING**

Mailing Address 1612 LINDEN STREET

City State Zip Code  
HULL IA 51239-7446

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
445.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00736**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MR. RONALD G. BRUSH SR.**

Mailing Address 5681 OCTONIA PLACE

City State Zip Code  
SARASOTA FL 34238-6221

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00737**

Amount of Each Receipt this Period  
111.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 476.00

**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 351 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ARLAND D. BRUSVEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13920 61ST AVENUE N.  
 City State Zip Code  
 MINNEAPOLIS MN 55446-3512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED INVESTMENT CONSULTANT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00738**  
 Amount of Each Receipt this Period  
 251.00

**B. MR. MASON BRUTSCHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 39 LLOYDEN DRIVE  
 City State Zip Code  
 ATHERTON CA 94027-3854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PERFECT.COM REQUESTED  
 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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00739**  
 Amount of Each Receipt this Period  
 300.00

**C. MRS. SYLVIA BRYAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 425 VILLA WOODS DRIVE  
 City State Zip Code  
 SALISBURY NC 28146-0703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00740**  
 Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 581.00  
**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 352 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ANTHONY W. BRYANT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 108 N. BARSTOW STREET  
 City State Zip Code  
 WAUKESHA WI 53186-4928  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CENTURY FENCE COMPANY BUSINESS EXECUTIVE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00741**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. THOMAS ELMER BRYANT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2013 SYCAMORE DR  
 City State Zip Code  
 REDDING CA 96001-4837  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BRYANT AUTOMOTIVE, INC. PRESIDENT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00742**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. THOMAS ELMER BRYANT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2013 SYCAMORE DR  
 City State Zip Code  
 REDDING CA 96001-4837  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BRYANT AUTOMOTIVE, INC. PRESIDENT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00743**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1200.00  
**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 353 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT BRYCE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3037 TWELVESTONE ROAD SE  
 City State Zip Code  
 OWENS X RDS AL 35763-8657  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00744**  
 Amount of Each Receipt this Period  
 375.00

**B. ELIZABETH MDT BRYDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 W 67TH STAPT 611  
 City State Zip Code  
 NEW YORK NY 10023-6200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00745**  
 Amount of Each Receipt this Period  
 255.00

**C. MR. JOHN O. BUBB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1900 RAVINE ROAD  
 BUILDING B APARTMENT 911  
 City State Zip Code  
 WILLIAMSPORT PA 17701-2064  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00746**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	680.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 354 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN O. BUBB**  
Full Name (Last, First, Middle Initial)

Mailing Address 1900 RAVINE ROAD  
BUILDING B APARTMENT 911

City WILLIAMSPORT State PA Zip Code 17701-2064

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00747**

Amount of Each Receipt this Period  
50.00

**B. MR. W. MICHAUX BUCHANAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 300 N. RIDGE ROAD  
UNIT 69

City HENRICO State VA Zip Code 23229-7460

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00748**

Amount of Each Receipt this Period  
50.00

**C. MR. ZACHARY TODD BUCHANAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 7775 ORTEGA BLUFF PARKWAY

City JACKSONVILLE State FL Zip Code 32244-8207

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

Name of Employer PENDUM L.L.C. Occupation DISTRICT MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
751.00

Date of Receipt  
03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00749**

Amount of Each Receipt this Period  
750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00

**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 355 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ZACHARY TODD BUCHANAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7775 ORTEGA BLUFF PARKWAY  
 City JACKSONVILLE State FL Zip Code 32244-8207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PENDUM L.L.C. Occupation DISTRICT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 751.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00750**  
 Amount of Each Receipt this Period 1.00

**B. MR. HARRY L. BUCK JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 204 APPLEBROOK DRIVE  
 City MALVERN State PA Zip Code 19355-3359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00751**  
 Amount of Each Receipt this Period 50.00

**C. MR. HARRY L. BUCK JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 204 APPLEBROOK DRIVE  
 City MALVERN State PA Zip Code 19355-3359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00752**  
 Amount of Each Receipt this Period 51.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 102.00  
**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 356 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. STEVEN H. BUCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 HARBOUR POINTE CMN  
 City State Zip Code  
 BUFFALO NY 14202-4305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BUFFALO OTOLOGIC GROUP PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 521.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00753**  
 Amount of Each Receipt this Period  
 201.00

**B. MR. DANIEL L. BUCKEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 221 PARK ROW  
 City State Zip Code  
 LAKESIDE OH 43440-1444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00754**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. MINOR BUCKINGHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19714 540TH STREET  
 City State Zip Code  
 WEST CONCORD MN 55985-5029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED FARMER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00755**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 441.00  
**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 357 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DANIEL J. BUCKLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4284 S. HUDSON PARKWAY  
 City State Zip Code  
 CHERRY HILLS VILLAGE CO 80113-5015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BUCKLEY POWDER COMPANY EXECUTIVE  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00756**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. ELDON L. BUCKNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13967 HUNT MOUNTAIN LANE  
 City State Zip Code  
 BAKER CITY OR 97814-8197  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED RANCHER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00757**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. GARY BUCY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2125 E. 79TH AVENUE  
 City State Zip Code  
 ANCHORAGE AK 99507-2957  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ALASKA HOUSEWARES, INC. SALESMAN  
 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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00758**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 358 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ANN BUESCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5300 LAKESIDE AVENUE E.  
 City State Zip Code  
 CLEVELAND OH 44114-3916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MCBEE SUPPLY CORP. BUSINESS EXECUTIVE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 371.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00759**  
 Amount of Each Receipt this Period  
 186.00

**B. MR. ISAAC DAVID BUFKIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 630  
 City State Zip Code  
 BRENHAM TX 77834-0630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1651.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00760**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. ISAAC DAVID BUFKIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 630  
 City State Zip Code  
 BRENHAM TX 77834-0630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1651.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00761**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 387.00  
**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 359 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. C. ROBERT BUFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 780428  
 City WICHITA State KS Zip Code 67278-0428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ZENITH DRILLING CORPORATION Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00762**  
 Amount of Each Receipt this Period  
 301.00

**B. MS. BARBARA S. BUGBEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8140 TOWNSHIP LINE ROAD APARTMENT 1102  
 City INDIANAPOLIS State IN Zip Code 46260-5825  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00763**  
 Amount of Each Receipt this Period  
 120.00

**C. MRS. MARGARET A. BUISSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 397 MOCKINGBIRD VALLEY ROAD  
 City LOUISVILLE State KY Zip Code 40207-1337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00764**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	541.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 360 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARGARET A. BUISSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 397 MOCKINGBIRD VALLEY ROAD  
 City LOUISVILLE State KY Zip Code 40207-1337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00765**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. KEITH F. BULLEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1736 ASHLAND ROAD  
 City MCBEE State SC Zip Code 29101-9408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ABSOLUTE CONSULTING, INC. Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00766**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. ROBERT H. BULLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14 STONY CORNERS ROAD  
 City AVON State CT Zip Code 06001-2622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00767**  
 Amount of Each Receipt this Period  
 126.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	227.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 361 OF 2949
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KYLE BULLOCK**  
Full Name (Last, First, Middle Initial)

Mailing Address 178 BEECHWOOD DRIVE

City PAULINE	State SC	Zip Code 29374-2530
-----------------	-------------	------------------------

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

Name of Employer PREFERRED FINISHING LLC	Occupation OWNER
---	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00768**

Amount of Each Receipt this Period  
 120.00

**B. MR. RICHARD BULLOCK**  
Full Name (Last, First, Middle Initial)

Mailing Address 3612 B. STREET

City SAUGATUCK	State MI	Zip Code 49453-9722
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI00769**

Amount of Each Receipt this Period  
 100.00

**C. MR. RICHARD BULLOCK**  
Full Name (Last, First, Middle Initial)

Mailing Address 3612 B. STREET

City SAUGATUCK	State MI	Zip Code 49453-9722
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI00770**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	320.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 362 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD BULLOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3612 B. STREET  
 City SAUGATUCK State MI Zip Code 49453-9722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00771**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. ALLAN R. BUNDY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11475 MOLLYLEA DRIVE  
 City BATON ROUGE State LA Zip Code 70815-6149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00772**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. ALLAN R. BUNDY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11475 MOLLYLEA DRIVE  
 City BATON ROUGE State LA Zip Code 70815-6149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00773**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 301.00  
**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 363 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LEATRICE BUNN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8508 N. HAYDEN PINES WAY  
 City HAYDEN State ID Zip Code 83835-8695  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00774**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. WILLIAM D. BUNTEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4000 S.W. CLARION PLACE  
 City TOPEKA State KS Zip Code 66610-2410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00775**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. WILLIAM F. BURBANK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3616 GLENVIEW AVENUE  
 City GLENVIEW State KY Zip Code 40025-7502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00776**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 364 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. CLOVIS BURCH**

Mailing Address P.O. BOX 6119

City State Zip Code  
SHREVEPORT LA 71136-6119

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

Name of Employer Occupation  
SELF-EMPLOYED PHARMACIST

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00777**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. MR. RAY H. BURCH**

Mailing Address 242 CAPRI DRIVE

City State Zip Code  
GAINESVILLE GA 30506-1752

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00778**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MR. RAY H. BURCH**

Mailing Address 242 CAPRI DRIVE

City State Zip Code  
GAINESVILLE GA 30506-1752

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00779**

Amount of Each Receipt this Period  
101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 701.00

**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 365 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MALCOLM R. BURD JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 139 MILL STREET  
 City WEST CREEK State NJ Zip Code 08092-9729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 267.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00780**  
 Amount of Each Receipt this Period 52.00

**B. MR. ARTHUR BURDORF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2800 28TH STREET SUITE 338  
 City SANTA MONICA State CA Zip Code 90405-6201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WOOD RIVER PROPERTIES, LLC Occupation REAL ESTATE / PROPERTY MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1005.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00781**  
 Amount of Each Receipt this Period 1005.00

**C. MR. PAUL BURG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 445 VIA ALMAR  
 City PALOS VERDES ESTATES State CA Zip Code 90274-1227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00782**  
 Amount of Each Receipt this Period 121.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1178.00  
**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 366 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES BURGIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2727 LYNDA LANE  
 City COLUMBUS State GA Zip Code 31906-1248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00783**  
 Amount of Each Receipt this Period  
 275.00

**B. MR. STEPHEN P. BURK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26450 W. 106TH TERRACE  
 City OLATHE State KS Zip Code 66061-7406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00784**  
 Amount of Each Receipt this Period  
 201.00

**C. MR. ARTHUR J. BURKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 450 LEXINGTON AVENUE  
 City NEW YORK State NY Zip Code 10017-3904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00785**  
 Amount of Each Receipt this Period  
 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5476.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 367 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID M. BURKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 132 LANCASTER DRIVE  
 APARTMENT 417  
 City IRVINGTON State VA Zip Code 22480-9744  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00786**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. EUGENE BURKEMPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24259 LAWSON HILL LANE  
 City BRASHEAR State MO Zip Code 63533-2522  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00787**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. DONALD L. BURKHOLDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2020 KESTREL COURT  
 City LANCASTER State PA Zip Code 17603-2455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI00788**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 368 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID T. BURLESON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9002 RANCICH STREET  
 City EL PASO State TX Zip Code 79904-1029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00789**  
 Amount of Each Receipt this Period 121.00

**B. MRS. JANICE C. BURNHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7745 INDIAN OAKS DRIVE  
 City VERO BEACH State FL Zip Code 32966-5143  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00790**  
 Amount of Each Receipt this Period 110.00

**C. WILLIAM BURNHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2309 NICHOLSON ST  
 City HOUSTON State TX Zip Code 77008-2042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00791**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 331.00  
**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 369 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JUDY BURNS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 123 GARDNER PLACE  
City SAINT CHARLES State MO Zip Code 63301-4582  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PATRIOT MACHINE, INC. Occupation ACCOUNTANT/PRESIDENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00792**  
Amount of Each Receipt this Period  
350.00

**B. MR. ROBERT W. BURNS JR.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1709 BARRINGTON COURT  
City FORT COLLINS State CO Zip Code 80524-1951  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00793**  
Amount of Each Receipt this Period  
50.00

**C. MRS. CONNIE G. BURNSIDE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1002 TONEY DRIVE S.E.  
City HUNTSVILLE State AL Zip Code 35802-1123  
FEC ID number of contributing federal political committee. **C**  
Name of Employer HOMEMAKER Occupation HOMEMAKER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00794**  
Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 370 OF 2949		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CONNIE G. BURNSIDE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1002 TONEY DRIVE S.E.  
 City HUNTSVILLE State AL Zip Code 35802-1123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: HOMEMAKER Occupation: HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00795**  
 Amount of Each Receipt this Period: 250.00

**B. MR. BRIAN BURROW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 611 ERIE STREET S.  
 City MASSILLON State OH Zip Code 44646-6711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: CAMPBELL OIL COMPANY Occupation: EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00796**  
 Amount of Each Receipt this Period: 1500.00

**C. MR. CHARLES TED BURT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8 S. 041 CREEK DRIVE  
 City NAPERVILLE State IL Zip Code 60540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: SELF-EMPLOYED Occupation: SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00797**  
 Amount of Each Receipt this Period: 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 371 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GERALD G. BURTNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 733 CASTLE KIRK DRIVE  
 City State Zip Code  
 BATON ROUGE LA 70808-6018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00798**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. GERALD G. BURTNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 733 CASTLE KIRK DRIVE  
 City State Zip Code  
 BATON ROUGE LA 70808-6018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00799**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. DAVID R. BURTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1097  
 City State Zip Code  
 SALIDA CO 81201-1097  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 601.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00800**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 401.00  
**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 372 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID R. BURTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1097  
 City SALIDA State CO Zip Code 81201-1097  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00801**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. DAVID R. BURTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1097  
 City SALIDA State CO Zip Code 81201-1097  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00802**  
 Amount of Each Receipt this Period  
 201.00

**C. MR. DONALD W. BURTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 416 KENDALL ROAD  
 City CHURCHVILLE State NY Zip Code 14428-9326  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EXCEL MANAGMENT Occupation ECONOMIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00803**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 651.00  
**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 373 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. STANISLAW BURZYNSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 W. RIVERCREST DRIVE  
 City HOUSTON State TX Zip Code 77042-2127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MEDICAL DOCTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00804**  
 Amount of Each Receipt this Period 660.00

**B. DR. STANISLAW BURZYNSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 W. RIVERCREST DRIVE  
 City HOUSTON State TX Zip Code 77042-2127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MEDICAL DOCTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00805**  
 Amount of Each Receipt this Period 20.00

**C. MRS. SARA BUSBEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1132 SAN JACINTO AVENUE  
 City TEXAS CITY State TX Zip Code 77590-5547  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00806**  
 Amount of Each Receipt this Period 400.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1080.00  
**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 374 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. C. L. BUSBY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4726 ASHVILLE PLACE  
 City AMARILLO State TX Zip Code 79119-6534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00807**  
 Amount of Each Receipt this Period  
 110.00

**B. MRS. ELIZABETH BUSHELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2516 ROSE CREEK PARKWAY S.  
 City FARGO State ND Zip Code 58104-6699  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00808**  
 Amount of Each Receipt this Period  
 75.00

**C. MR. STEVEN L. BUTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17632 NE 15TH PLACE  
 City BELLEVUE State WA Zip Code 98008-3111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI00809**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	685.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 375 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. A. A. BUTLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21 WINDWARD ROAD  
 City BENBROOK State TX Zip Code 76132-1020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00810**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. JEROME BUTLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 940 LIBERTY BLVD.  
 APARTMENT 104  
 City SUN PRAIRIE State WI Zip Code 53590-4328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00811**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. JEROME BUTLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 940 LIBERTY BLVD.  
 APARTMENT 104  
 City SUN PRAIRIE State WI Zip Code 53590-4328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00812**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 376 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PATRICIA BUTLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 781 CRANDON BLVD.  
 APARTMENT 1703  
 City KEY BISCAWAYNE State FL Zip Code 33149-2548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00813**  
 Amount of Each Receipt this Period  
 400.00

**B. MR. RICHARD BUTLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 705  
 City RAYMONDVILLE State TX Zip Code 78580-0705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00814**  
 Amount of Each Receipt this Period  
 300.00

**C. MS. NONA A. BUTTERWORTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 182 IRVING PLACE  
 City BASKING RIDGE State NJ Zip Code 07920-3083  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00815**  
 Amount of Each Receipt this Period  
 135.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	835.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 377 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. NONA A. BUTTERWORTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 182 IRVING PLACE  
 City BASKING RIDGE State NJ Zip Code 07920-3083  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00816**  
 Amount of Each Receipt this Period  
 135.00

**B. MR. BILL BUTTLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1814 OLIVE STREET # 2  
 City SCRANTON State PA Zip Code 18510-1980  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BENEFITS ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00817**  
 Amount of Each Receipt this Period  
 110.00

**C. DR. DAVID BUTTROSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 827 THERIOT ROAD  
 City LAKE CHARLES State LA Zip Code 70611-6115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00818**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1245.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ROGER L. BUTZ**

Mailing Address 1139 IVY LANE

City State Zip Code  
PISGAH FOREST NC 28768-5520

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI00819**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. MRS. DONNA BUZARD**

Mailing Address 9439 ROUTE 6

City State Zip Code  
KANE PA 16735-4729

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00820**

Amount of Each Receipt this Period  
125.00

Full Name (Last, First, Middle Initial)  
**C. MR. CONLEY BYRD**

Mailing Address 2711 BYRD ROAD

City State Zip Code  
REDFIELD AR 72132-9192

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.99

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00821**

Amount of Each Receipt this Period  
101.99

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 726.99

**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 379 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CONLEY BYRD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2711 BYRD ROAD  
 City State Zip Code  
 REDFIELD AR 72132-9192  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 211.99

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00822**  
 Amount of Each Receipt this Period  
 110.00

**B. MR. MARTIN BYRLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4566 LAKE STREET  
 City State Zip Code  
 LAKE CHARLES LA 70605-5414  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED INSURANCE AGENT  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00823**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. MARY BYRNES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3306 W. LA RUA STREET  
 City State Zip Code  
 PENSACOLA FL 32505-7628  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NURSE/OFFICE MANAGER RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00824**  
 Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 395.00  
**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 380 OF 2949  
(check only one)  
 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES BYXBEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7373 N. SCOTTSDALE ROAD  
 SUITE B170  
 City SCOTTSDALE State AZ Zip Code 85253-3540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00825**  
 Amount of Each Receipt this Period  
 220.00

**B. MS. ANNE MUDD CABANISS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 804 PRINCE STREET  
 City ALEXANDRIA State VA Zip Code 22314-3007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTOR  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6551.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00826**  
 Amount of Each Receipt this Period  
 2500.00

**C. MS. ANNE MUDD CABANISS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 804 PRINCE STREET  
 City ALEXANDRIA State VA Zip Code 22314-3007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTOR  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6551.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00827**  
 Amount of Each Receipt this Period  
 1001.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3721.00  
**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 381 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MICHAEL CABBAD**

Mailing Address 8007 NARROWS AVE

City State Zip Code  
BROOKLYN NY 11209-2830

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

Name of Employer Occupation  
PHYSICIAN PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00828**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. JOHN G. CABOT**

Mailing Address 1 TUCKS POINT ROAD

City State Zip Code  
MANCHESTER MA 01944-1434

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00829**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. MR. DONATO CACCHIOTTI**

Mailing Address 11581 ENYART ROAD

City State Zip Code  
LOVELAND OH 45140-8222

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

Name of Employer Occupation  
MEDICAL LASER RENTAL & SERVICE COMP. LASER TECHNICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00830**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

**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 382 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN CAEZZA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55 POPLAR HILL DRIVE  
 City FARMINGTON State CT Zip Code 06032-2419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer C.A.T.V. Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00831**  
 Amount of Each Receipt this Period  
 1000.00

**B. MS. BUFFY M. CAFRETY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5334 GOLDSBORO ROAD  
 City BETHESDA State MD Zip Code 20817-6342  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00832**  
 Amount of Each Receipt this Period  
 1000.00

**C. MRS. MARY T. CAHO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 77 COVE LANE  
 City GERRARDSTOWN State WV Zip Code 25420-3609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00833**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CRAIG SCOTT CAIRNS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1409 E. SAINT LOUIS AVENUE  
 UNIT 4  
 City LAS VEGAS State NV Zip Code 89104-3449  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CLARK COUNTY UNIFIED SCHOOL DISTRICT Occupation TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 341.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00834**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. JOSEPH CALCATERRA JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 26428  
 City EL PASO State TX Zip Code 79926-6428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BODY COMPANY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00835**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. TAURINO V. CALDERON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2257 N. SPRINGFIELD AVENUE  
 City CHICAGO State IL Zip Code 60647-2217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00836**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 351.00  
**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 384 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TAURINO V. CALDERON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2257 N. SPRINGFIELD AVENUE

City CHICAGO	State IL	Zip Code 60647-2217
-----------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation REQUESTED
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
370.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2014

**Transaction ID : 2014M04L11AI00837**

Amount of Each Receipt this Period  
120.00

**B. MR. TAURINO V. CALDERON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2257 N. SPRINGFIELD AVENUE

City CHICAGO	State IL	Zip Code 60647-2217
-----------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation REQUESTED
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
370.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2014

**Transaction ID : 2014M04L11AI00838**

Amount of Each Receipt this Period  
50.00

**C. MRS. JUDY N. CALDWELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 7902 S. RUN VIEW

City SPRINGFIELD	State VA	Zip Code 22153-3859
---------------------	-------------	------------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
722.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2014

**Transaction ID : 2014M04L11AI00839**

Amount of Each Receipt this Period  
180.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 385 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. JUDY N. CALDWELL</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI00840</b>
Mailing Address 7902 S. RUN VIEW		Amount of Each Receipt this Period 181.00
City SPRINGFIELD	State VA	Zip Code 22153-3859
FEC ID number of contributing federal political committee. C		
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 722.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. JUDY N. CALDWELL</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI00841</b>
Mailing Address 7902 S. RUN VIEW		Amount of Each Receipt this Period 1.00
City SPRINGFIELD	State VA	Zip Code 22153-3859
FEC ID number of contributing federal political committee. C		
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 722.00	

Full Name (Last, First, Middle Initial) <b>C. MR. ALBERT CALFANO</b>		Date of Receipt 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI00842</b>
Mailing Address 160 HEMPSTEAD ROAD		Amount of Each Receipt this Period 105.00
City TRENTON	State NJ	Zip Code 08610-1035
FEC ID number of contributing federal political committee. C		
Name of Employer INVESTOR	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	287.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 386 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD E. CALFEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 FAUSTIANA PLACE  
 City MARYVILLE State MO Zip Code 64468-2015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00843**  
 Amount of Each Receipt this Period  
 201.00

**B. MR. NEIL J. CALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1500 ATLANTIC BLVD. APARTMENT 307  
 City KEY WEST State FL Zip Code 33040-5071  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI00844**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. VAL CALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 440 E 4TH AVE  
 City AFTON State WY Zip Code 83110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00845**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 951.00  
**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 387 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. BARBARA L. CAMERON**  
Full Name (Last, First, Middle Initial)

Mailing Address 4268 PACIFICO LANE

City LAS VEGAS State NV Zip Code 89135-2509

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **820.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 11 / 2014**  
**Transaction ID : 2014M04L11AI00846**

Amount of Each Receipt this Period  
**410.00**

**B. MR. COLLINS CAMERON**  
Full Name (Last, First, Middle Initial)

Mailing Address 116 1/2 S. WASHINGTON STREET

City LODI State CA Zip Code 95240-3067

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

Name of Employer ALEGRE TRUCKING Occupation TRUCK DRIVER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **511.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI00847**

Amount of Each Receipt this Period  
**100.00**

**C. MR. COLLINS CAMERON**  
Full Name (Last, First, Middle Initial)

Mailing Address 116 1/2 S. WASHINGTON STREET

City LODI State CA Zip Code 95240-3067

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

Name of Employer ALEGRE TRUCKING Occupation TRUCK DRIVER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **511.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 28 / 2014**  
**Transaction ID : 2014M04L11AI00848**

Amount of Each Receipt this Period  
**101.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>611.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 388 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SHIRLEY M. CAMP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13 CLUB ESTATES PARKWAY  
 City THE HILLS State TX Zip Code 78738-1430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00849**  
 Amount of Each Receipt this Period 100.00

**B. MR. ALEX CAMPBELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 871  
 City DENVER State CO Zip Code 80201-0871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ENDURING RESOURCES, LLC Occupation VICE PRESIDNT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00850**  
 Amount of Each Receipt this Period 1000.00

**C. MR. CHARLES R. CAMPBELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3320 CREEKVIEW DRIVE  
 City BONITA SPRINGS State FL Zip Code 34134-2622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00851**  
 Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1400.00  
**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 389 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRED R. CAMPBELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 186  
 City PAINT ROCK State TX Zip Code 76866-0186  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00852**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. J. MELFORT CAMPBELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 PEMBRIDGE DRIVE APARTMENT 303  
 City LAKE FOREST State IL Zip Code 60045-4216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00853**  
 Amount of Each Receipt this Period  
 235.00

**C. MR. J. MELFORT CAMPBELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 PEMBRIDGE DRIVE APARTMENT 303  
 City LAKE FOREST State IL Zip Code 60045-4216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00854**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	436.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 390 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LEWIS CAMPBELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21 MARICER WAY  
 City VERO BEACH State FL Zip Code 32963  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00855**  
 Amount of Each Receipt this Period  
 400.00

**B. MR. WILLIAM R. CAMPBELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 901 HUNTERS RIDGE  
 City MARYVILLE State TN Zip Code 37803-0486  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00856**  
 Amount of Each Receipt this Period  
 600.00

**C. MR. VERNON CAMPYNOL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17090 S. EADEN ROAD  
 City OREGON CITY State OR Zip Code 97045-8673  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00857**  
 Amount of Each Receipt this Period  
 400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 391 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEVEN CANALE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4954 NORTSHORE DR  
 City FRISCO State TX Zip Code 75034-7569  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SOFTLAYER TECHNOLOGIES Occupation VP SALES  
 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  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00858**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. A. J. CANNATA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1636  
 City MORGAN CITY State LA Zip Code 70381-1636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00859**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. DAVID T. CANNON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 870 MORNINGSIDE DRIVE APARTMENT G122  
 City FULLERTON State CA Zip Code 92835-3588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00860**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 392 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID T. CANNON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 870 MORNINGSDRIVE  
 APARTMENT G122  
 City FULLERTON State CA Zip Code 92835-3588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00861**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. CHARLES S. CANTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 46 COTTON CROSSING W.  
 City SAVANNAH State GA Zip Code 31411-1543  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00862**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. CHARLES S. CANTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 46 COTTON CROSSING W.  
 City SAVANNAH State GA Zip Code 31411-1543  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00863**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 621.00  
**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 393 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN E. CANTLON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1795 BRAMBLE DRIVE  
 City EAST LANSING State MI Zip Code 48823-1729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00864**  
 Amount of Each Receipt this Period  
 55.00

**B. MR. JOHN E. CANTLON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1795 BRAMBLE DRIVE  
 City EAST LANSING State MI Zip Code 48823-1729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00865**  
 Amount of Each Receipt this Period  
 85.00

**C. MS. ROSE ELLA CAPANDA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16405 WOODLAND STREET  
 City TRENTON State MI Zip Code 48183-1657  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00866**  
 Amount of Each Receipt this Period  
 90.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	230.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 394 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PETER P. CAPPAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 5008  
 City ELGIN State IL Zip Code 60121-5008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00867**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. WILLIAM N. CAPRONI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 724 FREEDOM DRIVE  
 City CARNEGIE State PA Zip Code 15106-1597  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00868**  
 Amount of Each Receipt this Period  
 150.00

**C. MR. WILLIAM N. CAPRONI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 724 FREEDOM DRIVE  
 City CARNEGIE State PA Zip Code 15106-1597  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00869**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 395 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DANTE CARAVAGGIO**  
Full Name (Last, First, Middle Initial)

Mailing Address 26 VALERIO

City NEWPORT BEACH State CA Zip Code 92660-9108

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00870**

Amount of Each Receipt this Period  
 101.00

**B. BALBINA CARDENAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 14074 MINT TRAIL

City SAN ANTONIO State TX Zip Code 78232-3509

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00871**

Amount of Each Receipt this Period  
 251.00

**C. MR. CECIL P. CAREY**  
Full Name (Last, First, Middle Initial)

Mailing Address 755 ORCHARD DRIVE

City PASO ROBLES State CA Zip Code 93446-2330

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00872**

Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 472.00

**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 396 OF 2949  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CECIL P. CAREY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 755 ORCHARD DRIVE

City PASO ROBLES	State CA	Zip Code 93446-2330
---------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
321.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2014

**Transaction ID : 2014M04L11AI00873**

Amount of Each Receipt this Period  
101.00

**B. MR. FRANCIS J. CAREY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 485 LEWIS LANE

City AMBLER	State PA	Zip Code 19002-5116
----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2014

**Transaction ID : 2014M04L11AI00874**

Amount of Each Receipt this Period  
250.00

**C. MR. FRANCIS J. CAREY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 485 LEWIS LANE

City AMBLER	State PA	Zip Code 19002-5116
----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2014

**Transaction ID : 2014M04L11AI00875**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	601.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 397 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SUSAN L. CAREY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13950 N.W. GREENWOOD DRIVE  
 City PORTLAND State OR Zip Code 97229-2347  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00876**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. ANTHONY CARIATI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 337 MC ARTHUR BLVD.  
 City HAUPPAUGE State NY Zip Code 11788-3002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00877**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. ANTHONY CARIATI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 337 MC ARTHUR BLVD.  
 City HAUPPAUGE State NY Zip Code 11788-3002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00878**  
 Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 398 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ANTHONY CARIATI**

Mailing Address 337 MC ARTHUR BLVD.

City State Zip Code  
HAUPPAUGE NY 11788-3002

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00879**

Amount of Each Receipt this Period  
101.00

Full Name (Last, First, Middle Initial)  
**B. MR. DAVID CARLSEN**

Mailing Address 4340 FREMONT AVENUE S.

City State Zip Code  
MINNEAPOLIS MN 55409-1721

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

Name of Employer Occupation  
UMI COMPANY, I.N.C. MANUFACTURING

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00880**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MRS. LOMA CARLSON**

Mailing Address 1003 RIDGEWOOD DRIVE

City State Zip Code  
DECORAH IA 52101-2310

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00881**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 626.00

**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 399 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. PETER C. CARLSON**

Mailing Address 20387 BIG BEAR COURT

City State Zip Code  
BEND OR 97702-9489

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

Name of Employer Occupation  
SELF-EMPLOYED BUSINESS OWNER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
264.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00882**

Amount of Each Receipt this Period  
264.00

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT CARLSON**

Mailing Address 2420 BLARNEY STONE DRIVE

City State Zip Code  
BELOIT WI 53511-3902

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 20 / 2014  
**Transaction ID : 2014M04L11AI00883**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. MR. SCOTT A. CARLSON**

Mailing Address 3486 GOODWOOD DRIVE N.E.

City State Zip Code  
GRAND RAPIDS MI 49546-7224

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00884**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 764.00

**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 400 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. WANDA FAYE CARLSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8039 EMBERLY DRIVE  
 City State Zip Code  
 JENISON MI 49428-9167  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BREMER & NELSON, LLP BOOKKEEPER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00885**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. JAMES EDWARD CARLTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3006 ELBERT STREET  
 City State Zip Code  
 HOUSTON TX 77098-2022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CONOCO PHILLIPS COMPANY PETROLEUM LANDMAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00886**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. STANLEY C. CARMICHAEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1510 71ST ST.  
 City State Zip Code  
 FENNVILLE MI 49408-9727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI00887**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1250.00  
**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 402 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT W. CARNES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2609 EASTRIDGE DRIVE  
 City ALAMOGORDO State NM Zip Code 88310-4400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NEWTEC Occupation WHITE SANDS MISSILE SUPERVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00891**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. LUCIUS WILLIAM CARNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1527  
 City CANTON State TX Zip Code 75103-8854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RE HODGES CO. Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00892**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. LUCIUS WILLIAM CARNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1527  
 City CANTON State TX Zip Code 75103-8854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RE HODGES CO. Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00893**  
 Amount of Each Receipt this Period  
 65.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 235.00  
**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 403 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KIMBERLY CAROLAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 11 DEXTER DRIVE N.

City BASKING RIDGE State NJ Zip Code 07920-1540

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

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt: **03 / 14 / 2014**  
Transaction ID : **2014M04L11AI00894**

Amount of Each Receipt this Period: **140.00**

**B. MR. JAMES R. CAROLLO**  
Full Name (Last, First, Middle Initial)

Mailing Address 1020 15TH STREET APARTMENT 13E

City DENVER State CO Zip Code 80202-2305

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

Name of Employer: **SELF-EMPLOYED** Occupation: **TUTOR**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **6101.00**

Date of Receipt: **03 / 20 / 2014**  
Transaction ID : **2014M04L11AI00895**

Amount of Each Receipt this Period: **1500.00**

**C. MR. JAMES R. CAROLLO**  
Full Name (Last, First, Middle Initial)

Mailing Address 1020 15TH STREET APARTMENT 13E

City DENVER State CO Zip Code 80202-2305

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

Name of Employer: **SELF-EMPLOYED** Occupation: **TUTOR**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **6101.00**

Date of Receipt: **03 / 25 / 2014**  
Transaction ID : **2014M04L11AI00896**

Amount of Each Receipt this Period: **1001.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2641.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 404 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LYLE L. CARPENTER**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 39

City BONDURANT State IA Zip Code 50035-0039

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

Name of Employer C.S.I. CHEMICAL CORP Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00897**

Amount of Each Receipt this Period  
 50.00

**B. MR. LYLE L. CARPENTER**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 39

City BONDURANT State IA Zip Code 50035-0039

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

Name of Employer C.S.I. CHEMICAL CORP Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI00898**

Amount of Each Receipt this Period  
 200.00

**C. MR. ROBERT R. CARPENTER III**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 732

City MONTCHANIN State DE Zip Code 19710-0732

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

Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER

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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00899**

Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 405 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. EUGENE CARR**

Mailing Address 875 18TH AVENUE S.

City State Zip Code  
NAPLES FL 34102-7542

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00900**

Amount of Each Receipt this Period  
110.00

Full Name (Last, First, Middle Initial)  
**B. MS. AVIS A. CARRERA**

Mailing Address P.O. BOX 316617

City State Zip Code  
CHICAGO IL 60631-6617

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

Name of Employer Occupation  
MIDWESTERN CHRISTIAN ACADEMY TEACHER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
336.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00901**

Amount of Each Receipt this Period  
101.00

Full Name (Last, First, Middle Initial)  
**C. MS. AVIS A. CARRERA**

Mailing Address P.O. BOX 316617

City State Zip Code  
CHICAGO IL 60631-6617

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

Name of Employer Occupation  
MIDWESTERN CHRISTIAN ACADEMY TEACHER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
336.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00902**

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 336.00

**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 406 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD CARRIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 51323 COUNTY ROAD 215  
 City LAWRENCE State MI Zip Code 49064-9067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00903**  
 Amount of Each Receipt this Period  
 75.00

**B. MRS. ANNIE MAE CARRINGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 115 LAGOS AVENUE  
 City SAN ANTONIO State TX Zip Code 78209-5622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00904**  
 Amount of Each Receipt this Period  
 220.00

**C. MS. CONNIE M. CARROLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3628 S.E. 26TH STREET  
 City DEL CITY State OK Zip Code 73115-2603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI00905**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	345.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 407 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CONNIE M. CARROLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3628 S.E. 26TH STREET  
 City State Zip Code  
 DEL CITY OK 73115-2603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00906**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. JAMES L. CARROLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2212 FM 466  
 City State Zip Code  
 SEGUIN TX 78155-1002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00907**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. JAMES L. CARROLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2212 FM 466  
 City State Zip Code  
 SEGUIN TX 78155-1002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00908**  
 Amount of Each Receipt this Period  
 51.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 151.00  
**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 408 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HOWARD CARSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 6226 JAKE ROAD

City STEDMAN State NC Zip Code 28391-8610

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00909**

Amount of Each Receipt this Period  
 205.00

**B. MR. HOWARD CARSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 6226 JAKE ROAD

City STEDMAN State NC Zip Code 28391-8610

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00910**

Amount of Each Receipt this Period  
 50.00

**C. MR. JOSEPH M. CARSON JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 101 WALNUT AVENUE

City SAINT CLAIRSVILLE State OH Zip Code 43950-1702

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00911**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 355.00

**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

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOSEPH M. CARSON JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 WALNUT AVENUE  
 City SAINT CLAIRSVILLE State OH Zip Code 43950-1702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00912**  
 Amount of Each Receipt this Period 1.00

**B. MR. DONALD D. CARSTENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1722 HUMMINGBIRD COURT  
 City MARCO ISLAND State FL Zip Code 34145-4108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00913**  
 Amount of Each Receipt this Period 1000.00

**C. MR. THEODORE W. CART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 123 OLD FIELD ROAD  
 City BLOOMING GROVE State PA Zip Code 18428-6092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 396.40

Date of Receipt 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00914**  
 Amount of Each Receipt this Period 60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1061.00  
**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 410 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SALVADORE CARTA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1230 N. 138TH CIRCLE  
 City OMAHA State NE Zip Code 68154-5100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00915**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. BURTON ELLIS CARTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2013 ROBINSON AVENUE  
 City KINGMAN State AZ Zip Code 86401-4649  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation TAX PROFESSIONAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI00916**  
 Amount of Each Receipt this Period  
 200.00

**C. DR. JAMES E. CARTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 805 N. MAIN STREET  
 City TOMPKINSVILLE State KY Zip Code 42167-1002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00917**  
 Amount of Each Receipt this Period  
 100.00

**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 411 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES R. CARTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 467 N. FIRST STREET  
 City ROLLING FORK State MS Zip Code 39159-2213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00918**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. LAURANCE W. CARTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 521 N. FIRST STREET  
 City ROLLING FORK State MS Zip Code 39159-2215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00919**  
 Amount of Each Receipt this Period  
 400.00

**C. MR. LAURANCE W. CARTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 521 N. FIRST STREET  
 City ROLLING FORK State MS Zip Code 39159-2215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00920**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 412 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SHERRI J. CARTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1234  
 City POTEAU State OK Zip Code 74953-1234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation DOCTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00921**  
 Amount of Each Receipt this Period 250.00

**B. MR. TANDY W. CARTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 104 S.W. TRUFFLES GLEN  
 City LAKE CITY State FL Zip Code 32024-1108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00922**  
 Amount of Each Receipt this Period 70.00

**C. MR. TENA P. CARTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 895 HIGHWAY 173  
 City WILMOT State AR Zip Code 71676-9429  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00923**  
 Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 620.00  
**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 413 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN G. CARTIER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2150 S. OCEAN BLVD.

City DELRAY BEACH State FL Zip Code 33483-6446

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00924**

Amount of Each Receipt this Period  
 150.00

**B. MRS. SUSAN F. ALTAMORE CARUSI**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 203  
312 FEEKS LANE

City MILL NECK State NY Zip Code 11765-0203

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00925**

Amount of Each Receipt this Period  
 25000.00

**C. MS. OLEVIA CASCADDEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 129 W. PENDLETON AVENUE

City LAPEL State IN Zip Code 46051-5548

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00926**

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25650.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 414 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. OLEVIA CASCADDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 129 W. PENDLETON AVENUE  
 City LAPEL State IN Zip Code 46051-5548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00927**  
 Amount of Each Receipt this Period  
 750.00

**B. MR. THOMAS B. CASE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2515 SAINT ANDREWS DRIVE  
 City OLYMPIA FIELDS State IL Zip Code 60461-1167  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00928**  
 Amount of Each Receipt this Period  
 1100.00

**C. CHARLES CASH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6387B CAMP BOWIE 221  
 City FORT WORTH State TX Zip Code 76116-5423  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CONSULTANT Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00929**  
 Amount of Each Receipt this Period  
 225.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2075.00  
**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 415 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. PATRICIA J. CASSESE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7677 WINTERBERRY DRIVE  
 City BOARDMAN State OH Zip Code 44512-4723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RESTURANT OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00930**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. JOHN J. CASTELLANI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1600 30TH STREET NW  
 City WASHINGTON State DC Zip Code 20007-2903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00931**  
 Amount of Each Receipt this Period  
 5000.00

**C. MR. PHILLIP J. CASTELLINI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 312 ELM STREET SUITE 2600  
 City CINCINNATI State OH Zip Code 45202-2728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MERCHANTS COLD STORAGE Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00932**  
 Amount of Each Receipt this Period  
 2800.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8050.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 416 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT H. CASTELLINI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2180 GRANDIN ROAD  
 City State Zip Code  
 CINCINNATI OH 45208-3306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CASTELLINI COMPANY STOCK BROKER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 32400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00933**  
 Amount of Each Receipt this Period  
 32400.00

**B. MS. GABRIEL CASTILLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1911 N.W. 20TH AVENUE  
 City State Zip Code  
 MIAMI FL 33125-1425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00934**  
 Amount of Each Receipt this Period  
 150.00

**C. MR. DALLAS CASTLEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 515 LENOX NAUVOO ROAD  
 City State Zip Code  
 DYERSBURG TN 38024-6180  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED SMALL BUSINESS  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00935**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 32670.00  
**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 417 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN CASTLES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2008 VAN STREET  
 City TUPELO State MS Zip Code 38804-1034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00936**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. NICHOLAS CASTORIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2325 CALLE DEGABRIEL NE  
 City ALBUQUERQUE State NM Zip Code 87122-1036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00937**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. NICHOLAS CASTORIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2325 CALLE DEGABRIEL NE  
 City ALBUQUERQUE State NM Zip Code 87122-1036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00938**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 418 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. NICHOLAS CASTORIA**

Mailing Address 2325 CALLE DEGABRIEL NE

City State Zip Code  
ALBUQUERQUE NM 87122-1036

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00939**

Amount of Each Receipt this Period  
150.00

Full Name (Last, First, Middle Initial)  
**B. MRS. CLAUDIA JANETTE CATALANO**

Mailing Address 202 GATES DRIVE

City State Zip Code  
LEXINGTON SC 29072-2872

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00940**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**C. MRS. CLAUDIA JANETTE CATALANO**

Mailing Address 202 GATES DRIVE

City State Zip Code  
LEXINGTON SC 29072-2872

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00941**

Amount of Each Receipt this Period  
55.00

**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 419 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN WESLEY CATER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 374

City KING	State NC	Zip Code 27021-0374
--------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI00942**

Amount of Each Receipt this Period  
1000.00

**B. MS. PAULA LOVELAND CATHEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3344 STONE BROOK COURT

City OKLAHOMA CITY	State OK	Zip Code 73120-0811
-----------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00943**

Amount of Each Receipt this Period  
300.00

**C. MR. GEORGE E. CATINIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 250 GARDEN ROAD

City NEW ORLEANS	State LA	Zip Code 70123-1952
---------------------	-------------	------------------------

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

Name of Employer M.G.A.	Occupation MEDICAL DOCTOR
----------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00944**

Amount of Each Receipt this Period  
120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1420.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 420 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE E. CATINIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 GARDEN ROAD

City NEW ORLEANS State LA Zip Code 70123-1952

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

Name of Employer M.G.A. Occupation MEDICAL DOCTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00945**

Amount of Each Receipt this Period  
 205.00

**B. MR. JOHN P. CATO**  
Full Name (Last, First, Middle Initial)

Mailing Address 1426 CLAY ROAD S.W.

City MABLETON State GA Zip Code 30126-1222

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00946**

Amount of Each Receipt this Period  
 200.00

**C. MR. JOHN A. CATSIMATIDIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 823 11TH AVE  
FL 5

City NEW YORK State NY Zip Code 10019-3557

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

Name of Employer RED APPLE GROUP Occupation INVESTMENTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI00947**

Amount of Each Receipt this Period  
 32400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32805.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 421 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. PAUL S. CAUSEY**

Mailing Address 528 HANSON DRIVE

City State Zip Code  
DOYLINE LA 71023-3936

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00948**

Amount of Each Receipt this Period  
240.00

Full Name (Last, First, Middle Initial)  
**B. MRS. THERESA M. CAVICCHI**

Mailing Address 23 ELDOR DRIVE

City State Zip Code  
SOUTH WALPOLE MA 02071-1012

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI00949**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MRS. THERESA M. CAVICCHI**

Mailing Address 23 ELDOR DRIVE

City State Zip Code  
SOUTH WALPOLE MA 02071-1012

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI00950**

Amount of Each Receipt this Period  
51.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 341.00

**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 422 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BARBARA A. CEBUHAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4116 ELIZABETH LANE  
 City State Zip Code  
 FAIRFAX VA 22032-1452  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 D.H.H.S./C.M.S. PUBLIC AFFAIRS SPECIALIST  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00951**  
 Amount of Each Receipt this Period  
 25.00

**B. MRS. BARBARA A. CEBUHAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4116 ELIZABETH LANE  
 City State Zip Code  
 FAIRFAX VA 22032-1452  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 D.H.H.S./C.M.S. PUBLIC AFFAIRS SPECIALIST  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI00952**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. STEPHEN CERRI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1556  
 City State Zip Code  
 RANCHO SANTA FE CA 92067-1556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1101.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00953**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	76.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 423 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN CERVIN JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 815A HILLTOP AVENUE EXT.

City ABINGDON	State MD	Zip Code 21009-1306
------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : 2014M04L11AI00954**

Amount of Each Receipt this Period  
70.00

**B. MR. JOHN CERVIN JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 815A HILLTOP AVENUE EXT.

City ABINGDON	State MD	Zip Code 21009-1306
------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2014

**Transaction ID : 2014M04L11AI00955**

Amount of Each Receipt this Period  
85.00

**C. MR. DANIEL H. CHABOT**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 95

City LOS ALAMOS	State CA	Zip Code 93440-0095
--------------------	-------------	------------------------

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

Name of Employer NAUTRONIX MARI PRO	Occupation DIRECTOR OF RANGE PROGRAMS
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : 2014M04L11AI00956**

Amount of Each Receipt this Period  
135.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	290.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 424 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. DANIEL H. CHABOT</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI00957</b>
Mailing Address P.O. BOX 95		Amount of Each Receipt this Period 120.00
City LOS ALAMOS	State CA	Zip Code 93440-0095
FEC ID number of contributing federal political committee. C		
Name of Employer NAUTRONIX MARI PRO	Occupation DIRECTOR OF RANGE PROGRAMS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. HELEN B. CHADWICK</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI00958</b>
Mailing Address 60 STAFFORD STREET #231		Amount of Each Receipt this Period 50.00
City PLYMOUTH	State MA	Zip Code 02360-8120
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. HELEN B. CHADWICK</b>		Date of Receipt MM / DD / YYYY 03 / 17 / 2014 <b>Transaction ID : 2014M04L11AI00959</b>
Mailing Address 60 STAFFORD STREET #231		Amount of Each Receipt this Period 125.00
City PLYMOUTH	State MA	Zip Code 02360-8120
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	295.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 425 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. HELEN B. CHADWICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 60 STAFFORD STREET #231  
 City PLYMOUTH State MA Zip Code 02360-8120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00960**  
 Amount of Each Receipt this Period  
 50.00

**B. MRS. HELEN B. CHADWICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 60 STAFFORD STREET #231  
 City PLYMOUTH State MA Zip Code 02360-8120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI00961**  
 Amount of Each Receipt this Period  
 46.00

**C. MR. DAVID CHAFFE III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1546 JEFFERSON AVENUE  
 City NEW ORLEANS State LA Zip Code 70115-4121  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CHAFFE & ASSOCIATES, INC. Occupation INVESTMENT BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00962**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	396.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 426 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. JOHN H. CHAIN</b>		Date of Receipt
Mailing Address 416 VALLEY VIEW DRIVE SUITE 700		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
SCOTTSBLUFF	NE	69361-1420
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>2014M04L11AI00963</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. E. EUGENE CHAMBERS JR.</b>		Date of Receipt
Mailing Address 17644 S.E. 268TH PLACE		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
COVINGTON	WA	98042-4968
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>2014M04L11AI00964</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="291.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. E. EUGENE CHAMBERS JR.</b>		Date of Receipt
Mailing Address 17644 S.E. 268TH PLACE		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
COVINGTON	WA	98042-4968
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>2014M04L11AI00965</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="31.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="291.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="311.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 427 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GILBERT V. CHAMBERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4317 COUNTRY CLUB VIEW DRIVE  
 City BAYTOWN State TX Zip Code 77521  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI00966**  
 Amount of Each Receipt this Period 1.00

**B. KEITH CHAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 88 GREENWICH STREET, #329  
 City NY State NY Zip Code 10006-2209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ITNYCPT Occupation PHYSICAL THERAPIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 419.57

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00967**  
 Amount of Each Receipt this Period 419.57

**C. MS. BETTY JEAN CHANCE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18411 HARVEST MEADOWS DRIVE. W.  
 City WESTFIELD State IN Zip Code 46074-9123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00968**  
 Amount of Each Receipt this Period 15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 435.57  
**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 428 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. BETTY JEAN CHANCE**  
Full Name (Last, First, Middle Initial)

Mailing Address 18411 HARVEST MEADOWS DRIVE. W.

City WESTFIELD	State IN	Zip Code 46074-9123
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
266.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI00969**

Amount of Each Receipt this Period  
101.00

**B. MR. HENRY T. CHANDLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 890 N. GREEN BAY ROAD

City LAKE FOREST	State IL	Zip Code 60045-1707
---------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1370.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2014

**Transaction ID : 2014M04L11AI00970**

Amount of Each Receipt this Period  
1370.00

**C. MR. JAMES CHANEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 3452 OAK CANYON DRIVE

City MOUNTAIN BRK	State AL	Zip Code 35243-4812
----------------------	-------------	------------------------

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

Name of Employer SELF	Occupation PHYSICIAN
--------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2014

**Transaction ID : 2014M04L11AI00971**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2471.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 429 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. TERESITA CHANG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 137 49TH STREET  
 APARTMENT 2  
 City UNION CITY State NJ Zip Code 07087-6405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00972**  
 Amount of Each Receipt this Period  
 56.00

**B. MR. LYNN D. CHANLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1501 HANDBALL LANE  
 APARTMENT D.  
 City INDIANAPOLIS State IN Zip Code 46260-1071  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI00973**  
 Amount of Each Receipt this Period  
 25.00

**C. MR. LYNN D. CHANLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1501 HANDBALL LANE  
 APARTMENT D.  
 City INDIANAPOLIS State IN Zip Code 46260-1071  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00974**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	106.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 430 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LYNN D. CHANLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1501 HANDBALL LANE  
 APARTMENT D.  
 City INDIANAPOLIS State IN Zip Code 46260-1071  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI00975**  
 Amount of Each Receipt this Period 50.00

**B. MR. KENNETH W. CHAPMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1196 CLARK ROAD  
 City LITTLE MOUNTAIN State SC Zip Code 29075-9055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00976**  
 Amount of Each Receipt this Period 95.00

**C. MRS. CORETTA K. CHARITAT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1480 MONTELEGRE DRIVE  
 City SAN JOSE State CA Zip Code 95120-4831  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 426.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00977**  
 Amount of Each Receipt this Period 51.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 196.00  
**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 431 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CORETTA K. CHARITAT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1480 MONTELEGRE DRIVE  
 City SAN JOSE State CA Zip Code 95120-4831  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **426.00**

Date of Receipt: **03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI00978**  
 Amount of Each Receipt this Period: **275.00**

**B. MR. ELTON CHATFIELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1035 S. HILLBORN AVENUE  
 City WEST COVINA State CA Zip Code 91791-3631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **220.00**

Date of Receipt: **03 / 14 / 2014**  
**Transaction ID : 2014M04L11AI00979**  
 Amount of Each Receipt this Period: **55.00**

**C. MRS. KATHLEEN A. CHATHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5080 REEMELIN ROAD  
 City CINCINNATI State OH Zip Code 45211-1735  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI00980**  
 Amount of Each Receipt this Period: **100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>430.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 432 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. CAROL L. CHAUSSEE</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI00981</b>
Mailing Address 7524 118TH AVENUE N. E.		Amount of Each Receipt this Period 201.00
City KIRKLAND	State WA	Zip Code 98033-8120
FEC ID number of contributing federal political committee. C		
Name of Employer WESTWOOD CORPORATION	Occupation PROPERTY MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>B. MR. EDWIN CHAUVIN</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI00982</b>
Mailing Address 1043 BLUE RIDGE LANE		Amount of Each Receipt this Period 100.00
City MCCOMB	State MS	Zip Code 39648-6025
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.00	

Full Name (Last, First, Middle Initial) <b>C. MR. EDWIN CHAUVIN</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI00983</b>
Mailing Address 1043 BLUE RIDGE LANE		Amount of Each Receipt this Period 121.00
City MCCOMB	State MS	Zip Code 39648-6025
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	422.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 433 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DEEPAK V. CHAVDA MD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4525 CATINA LANE  
 City DALLAS State TX Zip Code 75229-5401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TEXAS BONE & JOINT CENTER Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00984**  
 Amount of Each Receipt this Period 50.00

**B. MR. FRED J. CHEMIDLIN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 917 TICE PLACE  
 City WESTFIELD State NJ Zip Code 07090-2628  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI00985**  
 Amount of Each Receipt this Period 50.00

**C. MR. DANIEL R. CHEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3663 VA DE COSTA  
 City THOUSAND OAKS State CA Zip Code 91360  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MICROWAVE MONOLITHICS INC. Occupation CORPORATE EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00986**  
 Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 434 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. KENDALL CHEN</b>		Date of Receipt
Mailing Address 580 PARK AVENUE		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
NEW YORK	NY	10065-7313
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI00987</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
ENERGY GROUP, INC.	ENERGY SECURITY CONSULTANT	<input type="text" value="110.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="360.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. KENDALL CHEN</b>		Date of Receipt
Mailing Address 580 PARK AVENUE		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
NEW YORK	NY	10065-7313
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI00988</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
ENERGY GROUP, INC.	ENERGY SECURITY CONSULTANT	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="360.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. MING HUNG CHEN</b>		Date of Receipt
Mailing Address 304 N. ASHVIEW LANE		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
WILMINGTON	DE	19807-2170
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI00989</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="660.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 435 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KEVIN J. CHERIPKA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9611 ESPIRIT COURT SE  
 City OLYMPIA State WA Zip Code 98513-6680  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI00990**  
 Amount of Each Receipt this Period  
 750.00

**B. MR. DAVID CHERRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5930 W. PARKER ROAD  
 City PLANO State TX Zip Code 75093-6419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PETROVER Occupation EXECUTIVE  
 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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI00991**  
 Amount of Each Receipt this Period  
 750.00

**C. MRS. JOSEPHINE W. CHESBROUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 340 ROSEBANK LANE  
 City WEST LAFAYETTE State IN Zip Code 47906-8715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00992**  
 Amount of Each Receipt this Period  
 105.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1605.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 436 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JOSEPHINE W. CHESBROUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 340 ROSEBANK LANE  
 City WEST LAFAYETTE State IN Zip Code 47906-8715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI00993**  
 Amount of Each Receipt this Period 105.00

**B. MR. PETE R. CHIERICOZZI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2255 OREGON ROAD  
 City SALVISA State KY Zip Code 40372-9638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI00994**  
 Amount of Each Receipt this Period 275.00

**C. MR. RONALD C. CHIMENTI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3700 RIVER POINT DRIVE  
 City FORT MYERS State FL Zip Code 33905-3854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI00995**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 480.00  
**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 437 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARY JANE CHIPOWSKY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1297 BEAR TAVERN ROAD  
 City State Zip Code  
 TITUSVILLE NJ 08560-1533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI00996**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. JAMES H. CHISHOLM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8304 W. PARKLAND COURT  
 City State Zip Code  
 MILWAUKEE WI 53223-3832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00997**  
 Amount of Each Receipt this Period  
 275.00

**C. MR. JAMES H. CHISHOLM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8304 W. PARKLAND COURT  
 City State Zip Code  
 MILWAUKEE WI 53223-3832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI00998**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 775.00  
**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 438 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. ROBERT M. CHMIELESKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17 HEARTHSTONE LANE  
 City FARMINGTON State CT Zip Code 06032-2480  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI00999**  
 Amount of Each Receipt this Period 101.00

**B. MR. ARTHUR BOURNE CHOATE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 EDGEWATER DRIVE APARTMENT 8D  
 City CORAL GABLES State FL Zip Code 33133-6965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01000**  
 Amount of Each Receipt this Period 2000.00

**C. MR. ALFRED H. CHOITZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19110 SUMMERS DRIVE  
 City SOUTH BEND State IN Zip Code 46637-3559  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 571.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01001**  
 Amount of Each Receipt this Period 165.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2266.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 439 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. ALFRED H. CHOITZ</b>		Date of Receipt 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI01002</b>
Mailing Address 19110 SUMMERS DRIVE		Amount of Each Receipt this Period 221.00
City SOUTH BEND	State IN	Zip Code 46637-3559
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 571.00	

Full Name (Last, First, Middle Initial) <b>B. MR. ALFRED H. CHOITZ</b>		Date of Receipt 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI01003</b>
Mailing Address 19110 SUMMERS DRIVE		Amount of Each Receipt this Period 75.00
City SOUTH BEND	State IN	Zip Code 46637-3559
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 571.00	

Full Name (Last, First, Middle Initial) <b>C. MR. STEVEN M. CHORKAWY</b>		Date of Receipt 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI01004</b>
Mailing Address 1371 RUSSELL AVENUE		Amount of Each Receipt this Period 51.00
City LINCOLN PARK	State MI	Zip Code 48146-1626
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	347.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 440 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ASSADOUR CHOUNGOURIAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 36 HUNT AVENUE  
 APARTMENT A.  
 City STRATFORD State NJ Zip Code 08084  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. SECURITY & ADMIRAL SECURITY Occupation SECURITY GUARD  
 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  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01005**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. DONNA S. CHRISTENSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 LAUREL STREET  
 APARTMENT 106  
 City SAN CARLOS State CA Zip Code 94070-2274  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RUGGER & JENSEN ASSOCIATES Occupation CONTROLLER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01006**  
 Amount of Each Receipt this Period  
 440.00

**C. MR. EDWARD R. CHRISTENSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1780 MILLCREEK WAY  
 City SALT LAKE CITY State UT Zip Code 84106-3234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01007**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	640.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 441 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GERALD CHRISTENSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1603 4TH AVENUE W.  
 City WILLISTON State ND Zip Code 58801-4126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01008**  
 Amount of Each Receipt this Period  
 275.00

**B. MR. OSCAR CHRISTENSEN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13642 CUMING STREET  
 City OMAHA State NE Zip Code 68154-5270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01009**  
 Amount of Each Receipt this Period  
 220.00

**C. MR. JERRY NATHANIEL CHRISTIAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 635 SHERMAN STREET APARTMENT 1  
 City AKRON State OH Zip Code 44311-1636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COMMUNITY SUPPORT SERVICES # 3 Occupation COMMERCIAL CLEANER  
 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  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01010**  
 Amount of Each Receipt this Period  
 3.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 498.00  
**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 442 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JERRY NATHANIEL CHRISTIAN**

Mailing Address 635 SHERMAN STREET  
APARTMENT 1

City AKRON State OH Zip Code 44311-1636

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

Name of Employer COMMUNITY SUPPORT SERVICES # 3 Occupation COMMERCIAL CLEANER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01011**

Amount of Each Receipt this Period 3.00

Full Name (Last, First, Middle Initial)  
**B. MR. JERRY NATHANIEL CHRISTIAN**

Mailing Address 635 SHERMAN STREET  
APARTMENT 1

City AKRON State OH Zip Code 44311-1636

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

Name of Employer COMMUNITY SUPPORT SERVICES # 3 Occupation COMMERCIAL CLEANER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01012**

Amount of Each Receipt this Period 3.00

Full Name (Last, First, Middle Initial)  
**C. MR. JERRY NATHANIEL CHRISTIAN**

Mailing Address 635 SHERMAN STREET  
APARTMENT 1

City AKRON State OH Zip Code 44311-1636

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

Name of Employer COMMUNITY SUPPORT SERVICES # 3 Occupation COMMERCIAL CLEANER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01013**

Amount of Each Receipt this Period 5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 11.00

**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 443 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JERRY NATHANIEL CHRISTIAN**

Mailing Address 635 SHERMAN STREET  
APARTMENT 1

City AKRON State OH Zip Code 44311-1636

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

Name of Employer COMMUNITY SUPPORT SERVICES # 3 Occupation COMMERCIAL CLEANER

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  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01014**

Amount of Each Receipt this Period  
 5.00

Full Name (Last, First, Middle Initial)  
**B. MR. JERRY NATHANIEL CHRISTIAN**

Mailing Address 635 SHERMAN STREET  
APARTMENT 1

City AKRON State OH Zip Code 44311-1636

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

Name of Employer COMMUNITY SUPPORT SERVICES # 3 Occupation COMMERCIAL CLEANER

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  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01015**

Amount of Each Receipt this Period  
 6.00

Full Name (Last, First, Middle Initial)  
**C. MR. JERRY NATHANIEL CHRISTIAN**

Mailing Address 635 SHERMAN STREET  
APARTMENT 1

City AKRON State OH Zip Code 44311-1636

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

Name of Employer COMMUNITY SUPPORT SERVICES # 3 Occupation COMMERCIAL CLEANER

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  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01016**

Amount of Each Receipt this Period  
 6.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	17.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 444 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. GLENN ARON CHRISTIANSEN</b>		Date of Receipt
Mailing Address 351 N. MOUNTAIN VIEW ROAD		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
BISHOP	CA	93514-2118
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI01017</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="220.00"/>
Name of Employer	Occupation	
PERRY MOTORS	AUTO MECHANIC	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. DR. MURRAY D. CHRISTIANSON</b>		Date of Receipt
Mailing Address 20242 RONSDALE DRIVE		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code
BEVERLY HILLS	MI	48025-3860
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI01018</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
HENRY FORD HEALTH SYSTEM	SURGEON	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. DR. MURRAY D. CHRISTIANSON</b>		Date of Receipt
Mailing Address 20242 RONSDALE DRIVE		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
BEVERLY HILLS	MI	48025-3860
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI01019</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
HENRY FORD HEALTH SYSTEM	SURGEON	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="470.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 445 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES F. CHRISTIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1187  
 City EAST DENNIS State MA Zip Code 02641-1187  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01020**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. JAMES F. CHRISTIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1187  
 City EAST DENNIS State MA Zip Code 02641-1187  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01021**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. DONALD A. CHRISTMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21920 PIERCE CIRCLE  
 City ELKHORN State NE Zip Code 68022-1709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01022**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 370.00  
**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 446 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LYNN CHRISTOPHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 28851 BAILEY RANCH RD  
 City HAYWARD State CA Zip Code 94542-2168  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ADAP.TV Occupation CONTROLLER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01023**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. WILLIAM J. CHRNELICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8 MANSION HILL DRIVE  
 City EWING State NJ Zip Code 08628-2656  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01024**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. EDWARD P. CHROMCZAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 FIELDSTONE LN  
 City BEACON FALLS State CT Zip Code 06403-1481  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01025**  
 Amount of Each Receipt this Period  
 235.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	735.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 447 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FORREST CHU**  
Full Name (Last, First, Middle Initial)

Mailing Address 8604 DENT DRIVE

City SAN DIEGO	State CA	Zip Code 92119-1408
-------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01026**

Amount of Each Receipt this Period  
55.00

**B. MR. FORREST CHU**  
Full Name (Last, First, Middle Initial)

Mailing Address 8604 DENT DRIVE

City SAN DIEGO	State CA	Zip Code 92119-1408
-------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01027**

Amount of Each Receipt this Period  
65.00

**C. DR. ELIAS TANG CHUA**  
Full Name (Last, First, Middle Initial)

Mailing Address 113 CENTRENEST LANE

City WILMINGTON	State DE	Zip Code 19807-1145
--------------------	-------------	------------------------

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

Name of Employer ANESTHESIA SERVICES, P.A.	Occupation ANESTHESIOLOGIST
---	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01028**

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	320.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 448 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. SUSAN L. CHURCH</b>		Date of Receipt
Mailing Address 2615 S.W. BARTON STREET APARTMENT 1-303		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City SEATTLE	State WA	Zip Code 98126-3970
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI01029</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="135.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="656.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MS. SUSAN L. CHURCH</b>		Date of Receipt
Mailing Address 2615 S.W. BARTON STREET APARTMENT 1-303		<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City SEATTLE	State WA	Zip Code 98126-3970
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI01030</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="40.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="656.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MS. SUSAN L. CHURCH</b>		Date of Receipt
Mailing Address 2615 S.W. BARTON STREET APARTMENT 1-303		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City SEATTLE	State WA	Zip Code 98126-3970
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI01031</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="41.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="656.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="216.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 449 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. SANDRA CHURCHWELL**

Mailing Address **6224 FOXHAVEN COURT**

City **PORT ORANGE**   State **FL**   Zip Code **32127-9550**

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

Name of Employer **RETIRED**   Occupation **RETIRED**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**03 / 18 / 2014**  
**Transaction ID : 2014M04L11AI01032**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**B. MR. MICHAEL J. CICCO**

Mailing Address **8071 VEGAS COURT**

City **WEST CHESTER**   State **OH**   Zip Code **45069-9267**

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

Name of Employer **H&R BLOCK**   Occupation **TAX PRO**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
**03 / 05 / 2014**  
**Transaction ID : 2014M04L11AI01033**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. MR. MICHAEL J. CICCO**

Mailing Address **8071 VEGAS COURT**

City **WEST CHESTER**   State **OH**   Zip Code **45069-9267**

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

Name of Employer **H&R BLOCK**   Occupation **TAX PRO**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
**03 / 12 / 2014**  
**Transaction ID : 2014M04L11AI01034**

Amount of Each Receipt this Period  
**120.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **220.00**

**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 450 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. FRANK CIHAK**

Mailing Address 9010 NOMINI LANE

City State Zip Code  
ALEXANDRIA VA 22309-2811

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01035**

Amount of Each Receipt this Period  
121.00

Full Name (Last, First, Middle Initial)  
**B. MR. JAY D. CIMINO**

Mailing Address P.O. BOX 85

City State Zip Code  
COLORADO SPRINGS CO 80901-0085

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

Name of Employer Occupation  
PHIL LONG DEALERSHIPS PRESIDENT/C.E.O.

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01036**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. MR. SALVATORE S. CIUFECU**

Mailing Address 109 E. BROADWAY  
UNIT D.

City State Zip Code  
MILFORD CT 06460-6172

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
465.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01037**

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1156.00

**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 451 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. SALVATORE S. CIUFECU</b>		Date of Receipt 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI01038</b>
Mailing Address 109 E. BROADWAY UNIT D.		Amount of Each Receipt this Period 100.00
City MILFORD	State CT	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 465.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. SALVATORE S. CIUFECU</b>		Date of Receipt 03 / 14 / 2014 <b>Transaction ID : 2014M04L11AI01039</b>
Mailing Address 109 E. BROADWAY UNIT D.		Amount of Each Receipt this Period 30.00
City MILFORD	State CT	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 465.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. SALVATORE S. CIUFECU</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI01040</b>
Mailing Address 109 E. BROADWAY UNIT D.		Amount of Each Receipt this Period 40.00
City MILFORD	State CT	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 465.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	170.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 452 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. SALVATORE S. CIUFECU</b>		Date of Receipt
Mailing Address 109 E. BROADWAY UNIT D.		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
MILFORD	CT	06460-6172
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	<b>Transaction ID : 2014M04L11AI01041</b>
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="465.00"/>	<input type="text" value="30.00"/>

Full Name (Last, First, Middle Initial) <b>B. MS. B. L. CLANCY</b>		Date of Receipt
Mailing Address P.O. BOX 31195		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
SANTA BARBARA	CA	93130-1195
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	<b>Transaction ID : 2014M04L11AI01042</b>
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="315.00"/>	<input type="text" value="65.00"/>

Full Name (Last, First, Middle Initial) <b>C. MRS. LAURA C. CLAPPISON</b>		Date of Receipt
Mailing Address 1382 NEWTOWN LANGHORNE ROAD #K106		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
NEWTOWN	PA	18940-2418
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	<b>Transaction ID : 2014M04L11AI01043</b>
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="260.00"/>	<input type="text" value="55.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 453 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALBERT C. CLARK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 966  
 City STARKVILLE State MS Zip Code 39760-0966  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer C.C. CLARK, INC. Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01044**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. ALFRED M. CLARK JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1030  
 City CARPINTERIA State CA Zip Code 93014-1030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01045**  
 Amount of Each Receipt this Period  
 1000.00

**C. MRS. CAROL CLARK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3550 HICKORY LANE  
 City ROCKFORD State IL Zip Code 61107-1346  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01046**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1111.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 454 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DANIEL K. CLARK**  
Full Name (Last, First, Middle Initial)

Mailing Address 3802 CHESAPEAKE AVENUE

City HAMPTON State VA Zip Code 23669-4612

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

Name of Employer LOCKWOOD BROTHERS, INC. Occupation PROJECT MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01047**

Amount of Each Receipt this Period 100.00

**B. MR. DONALD L. CLARK**  
Full Name (Last, First, Middle Initial)

Mailing Address 1611 ZERLANG COURT

City FOLSOM State CA Zip Code 95630-7311

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01048**

Amount of Each Receipt this Period 1.00

**C. MR. DONALD R. CLARK**  
Full Name (Last, First, Middle Initial)

Mailing Address 145 GRANVILLE ROAD

City WESTFIELD State MA Zip Code 01085-3943

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01049**

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 601.00

**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 455 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD R. CLARK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 145 GRANVILLE ROAD  
 City WESTFIELD State MA Zip Code 01085-3943  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01050**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. FRANKLIN CLARK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 CARRION COURT APARTMENT 101  
 City SAN JUAN State PR Zip Code 00911-1227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01051**  
 Amount of Each Receipt this Period  
 211.00

**C. MR. JAMES H. CLARK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 244 S.W. 180TH AVENUE  
 City PEMBROKE PINES State FL Zip Code 33029-3901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation QUALITY SYSTEMS AUDITOR/CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01052**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	381.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 456 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JOHN CLARK**

Mailing Address 1925 MONTICELLO STREET

City State Zip Code  
WAYNESBORO VA 22980-2203

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

Name of Employer Occupation  
CLARK MACHINE TOOL COMPANY MACHINERY SALES

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  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01053**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. MS. PATRICIA E. CLARK**

Mailing Address 57 DUBLIN AVENUE

City State Zip Code  
NASHUA NH 03063-2045

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

Name of Employer Occupation  
F.A.A. SECRETARY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
236.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI01054**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MS. PATRICIA E. CLARK**

Mailing Address 57 DUBLIN AVENUE

City State Zip Code  
NASHUA NH 03063-2045

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

Name of Employer Occupation  
F.A.A. SECRETARY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
236.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01055**

Amount of Each Receipt this Period  
36.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 386.00

**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 457 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RAOEL H. CLARK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 268 N. 4100 E.  
 City RIGBY State ID Zip Code 83442-5760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01056**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. RAOEL H. CLARK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 268 N. 4100 E.  
 City RIGBY State ID Zip Code 83442-5760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01057**  
 Amount of Each Receipt this Period  
 60.00

**C. MR. THOMAS J. CLARK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4510 PINE MOUNTAIN ROAD  
 City BIRMINGHAM State AL Zip Code 35213-1828  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KBR Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01058**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	210.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 458 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS J. CLARK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4510 PINE MOUNTAIN ROAD  
 City BIRMINGHAM State AL Zip Code 35213-1828  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KBR Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01059**  
 Amount of Each Receipt this Period 100.00

**B. MR. THOMAS J. CLARK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4510 PINE MOUNTAIN ROAD  
 City BIRMINGHAM State AL Zip Code 35213-1828  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KBR Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01060**  
 Amount of Each Receipt this Period 100.00

**C. MR. GEORGE G. CLARKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4426 CHALFONT PLACE  
 City BETHESDA State MD Zip Code 20816-1811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01061**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 459 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DAVID H. CLASSON**

Mailing Address 401 WESTERN AVENUE  
ROOM 208

City SAINT JOHNSBURY State VT Zip Code 05819-2741

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01062**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. DAVID H. CLASSON**

Mailing Address 401 WESTERN AVENUE  
ROOM 208

City SAINT JOHNSBURY State VT Zip Code 05819-2741

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01063**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MR. DAVID H. CLASSON**

Mailing Address 401 WESTERN AVENUE  
ROOM 208

City SAINT JOHNSBURY State VT Zip Code 05819-2741

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01064**

Amount of Each Receipt this Period  
50.00

**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 460 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HAL WAYNE CLAWSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14615 CAPRI ROAD  
 City ORLANDO State FL Zip Code 32832-6537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DELTA AIRLINES Occupation AVIATION MAINTENANCE TECHNICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01065**  
 Amount of Each Receipt this Period  
 126.00

**B. MS. ELIZABETH CLAYTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 875 S. DONNER WAY #1405  
 City SALT LAKE CITY State UT Zip Code 84108-2192  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01066**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. EDMUND J. CLEGG JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 147 BAY SPRING AVENUE APARTMENT 314  
 City BARRINGTON State RI Zip Code 02806-1376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01067**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	496.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 461 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MILTON L. CLEGG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2448 WENDOVER  
 City BELDEN State MS Zip Code 38826-8628  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WISE STAFFING SERVICES, INC. Occupation DIRECTOR  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01068**  
 Amount of Each Receipt this Period  
**500.00**

**B. MS. PATRICIA CLEGG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32 E. CALAVAR ROAD  
 City PHOENIX State AZ Zip Code 85022-4720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **201.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01069**  
 Amount of Each Receipt this Period  
**1.00**

**C. MR. JAMES E. CLEM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5826 FISHHAWK RIDGE DRIVE  
 City LITHIA State FL Zip Code 33547-3821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **361.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01070**  
 Amount of Each Receipt this Period  
**120.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>621.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 462 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES E. CLEM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5826 FISHHAWK RIDGE DRIVE  
 City State Zip Code  
 LITHIA FL 33547-3821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 361.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01071**  
 Amount of Each Receipt this Period  
 121.00

**B. MRS. ARLAYNE CLEMENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 675 REINERT ROAD  
 City State Zip Code  
 HATFIELD PA 19440-3733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01072**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. BRUCE CLEMENTS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1614 NORFOLK APT C  
 City State Zip Code  
 HOUSTON TX 77006-5296  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01073**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 671.00  
**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 463 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. VICKI M. CLICK**

Mailing Address 6403 E. MIRAMAR DRIVE

City State Zip Code  
TUCSON AZ 85715-3118

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01074**

Amount of Each Receipt this Period  
32400.00

Full Name (Last, First, Middle Initial)  
**B. MRS. BARBARA A. CLIFFORD**

Mailing Address 9213 W.H. BURGESS DRIVE

City State Zip Code  
EL PASO TX 79925-5116

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01075**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MR. BENNY E. CLIFTON**

Mailing Address 104 GORDON DRIVE

City State Zip Code  
COLUMBIA SC 29223-5818

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

Name of Employer Occupation  
SELF-EMPLOYED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01076**

Amount of Each Receipt this Period  
206.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 33106.00

**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 464 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES ROBERT CLIFTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 640 TABLE ROCK LANE  
 City WHEELING State WV Zip Code 26003-8412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01077**  
 Amount of Each Receipt this Period 121.00

**B. MR. JOHN P. CLINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13002 BEVERLY STREET  
 City LEAWOOD State KS Zip Code 66209-3654  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INSURANCE Occupation INSURANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01078**  
 Amount of Each Receipt this Period 120.00

**C. MR. JOHN P. CLINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13002 BEVERLY STREET  
 City LEAWOOD State KS Zip Code 66209-3654  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INSURANCE Occupation INSURANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01079**  
 Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 391.00  
**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

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WALTER D. CLINE III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 4122  
 City State Zip Code  
 AUSTIN TX 78765-4122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01080**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. JULIA LEA CLINE-SELLERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 CLEAR POND CRT  
 City State Zip Code  
 SPRING BRANCH TX 78070-3540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01081**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. JULIA LEA CLINE-SELLERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 CLEAR POND CRT  
 City State Zip Code  
 SPRING BRANCH TX 78070-3540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01082**  
 Amount of Each Receipt this Period  
 100.00

**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: PAGE 466 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. VIVIAN L. CLINTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 36 ELCHESTER DRIVE  
 City EAST NORTHPORT State NY Zip Code 11731-5607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 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  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01083**  
 Amount of Each Receipt this Period  
 250.00

**B. MS. VIVIAN L. CLINTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 36 ELCHESTER DRIVE  
 City EAST NORTHPORT State NY Zip Code 11731-5607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 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  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01084**  
 Amount of Each Receipt this Period  
 500.00

**C. MRS. LINDA CLOUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 28112 144TH AVENUE E.  
 City GRAHAM State WA Zip Code 98338-8784  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PROGRAM DESIGNER - CONSULTANT  
 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  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01085**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00  
**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 467 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PAUL M. CLUGSTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 935 DAVIS GROVE RD.

City HORSHAM State PA Zip Code 19044-1303

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01086**

Amount of Each Receipt this Period  
 250.00

**B. MR. RICHARD H. COAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3377 MILL VISTA ROAD  
UNIT 3607

City HIGHLANDS RANCH State CO Zip Code 80129-2410

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01087**

Amount of Each Receipt this Period  
 200.00

**C. MR. JOHN J. COATES JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 25277

City OKLAHOMA CITY State OK Zip Code 73125-0277

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

Name of Employer COATES FIELD SERVICE, INC. Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01088**

Amount of Each Receipt this Period  
 2.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	452.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 468 OF 2949  
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 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MISS ELEANOR L. COBB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 131 S. VISTA STREET  
 City LOS ANGELES State CA Zip Code 90036-2707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01089**  
 Amount of Each Receipt this Period  
 200.00

**B. MISS ELEANOR L. COBB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 131 S. VISTA STREET  
 City LOS ANGELES State CA Zip Code 90036-2707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01090**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. HENRY D. COBB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 603 HORSESHOE CURVE  
 City PIKE ROAD State AL Zip Code 36064-3409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01091**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 469 OF 2949  
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 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HENRY D. COBB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 603 HORSESHOE CURVE  
 City State Zip Code  
 PIKE ROAD AL 36064-3409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01092**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. JOHN S.P. COCHRAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 MIDDLE ROAD  
 City State Zip Code  
 PALM BEACH FL 33480-4712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED INVESTOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 505.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01093**  
 Amount of Each Receipt this Period  
 505.00

**C. MR. SEAN PAUL COCHRAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1857  
 City State Zip Code  
 LA MIRADA CA 90637-1857  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PROPERTY MANAGEMENT/REALTOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01094**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 805.00  
**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 470 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. C. ROBERT COFFEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2625 UNIVERSITY CLUB DRIVE  
 City State Zip Code  
 AUSTIN TX 78732-2002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01095**  
 Amount of Each Receipt this Period  
 55.00

**B. MR. C. ROBERT COFFEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2625 UNIVERSITY CLUB DRIVE  
 City State Zip Code  
 AUSTIN TX 78732-2002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01096**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. AARON COHEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30 SPRUCE LANE  
 City State Zip Code  
 WEATOGUE CT 06089-9401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 FINANCIAL PARTNERS CAPITAL MANAGEME INVESTMENT MANAGER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01097**  
 Amount of Each Receipt this Period  
 120.00

**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

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. AARON COHEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30 SPRUCE LANE  
 City WEATOGUE State CT Zip Code 06089-9401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FINANCIAL PARTNERS CAPITAL MANAGEME Occupation INVESTMENT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01098**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. SHARON L. COHEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10405 SANDRINGHAM COURT  
 City POTOMAC State MD Zip Code 20854-1901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PODESTY MATTOON Occupation LOBBYIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01099**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. STEVEN COHEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 BEDFORD CENTER ROAD  
 City BEDFORD HILLS State NY Zip Code 10507-2201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01100**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**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 472 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. FLORENCE F. COHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 40 W. 3RD AVENUE  
 APARTMENT 304  
 City SAN MATEO State CA Zip Code 94402-1564  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 512.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01101**  
 Amount of Each Receipt this Period  
 512.00

**B. DR. LAWRENCE H. COHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 45 SINGLETREE ROAD  
 City CHESTNUT HILL State MA Zip Code 02467-2826  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer B.W.P.O. Occupation SURGEON  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01102**  
 Amount of Each Receipt this Period  
 35.00

**C. MRS. BARBARA G. COKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 33136 STATE HIGHWAY 44  
 City SHINGLETOWN State CA Zip Code 96088-9797  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01103**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 597.00  
**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

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BARBARA G. COKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 33136 STATE HIGHWAY 44  
 City State Zip Code  
 SHINGLETOWN CA 96088-9797  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01104**  
 Amount of Each Receipt this Period  
 65.00

**B. MRS. BARBARA G. COKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 33136 STATE HIGHWAY 44  
 City State Zip Code  
 SHINGLETOWN CA 96088-9797  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01105**  
 Amount of Each Receipt this Period  
 70.00

**C. MRS. GENEASE COKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 HANCOCK DRIVE E.  
 City State Zip Code  
 SCOTTSBORO AL 35769-6118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01106**  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 285.00  
**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

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 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. GENEASE COKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 HANCOCK DRIVE E.  
 City State Zip Code  
 SCOTTSBORO AL 35769-6118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01107**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. DEAN COLDIRON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1285 SAINT MARK COURT  
 City State Zip Code  
 LOS ALTOS CA 94024-7040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 R&D TECHNICAL SALES  
 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  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01108**  
 Amount of Each Receipt this Period  
 150.00

**C. MR. PHIL CARSON COLDIRON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 335507 E. 930 ROAD  
 City State Zip Code  
 WELLSTON OK 74881-8220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PRESIDENT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01109**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 651.00  
**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 475 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PHIL CARSON COLDIRON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 335507 E. 930 ROAD  
 City WELLSTON State OK Zip Code 74881-8220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01110**  
 Amount of Each Receipt this Period  
 500.00

**B. MS. CHARIS P. COLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 491  
 City BRYN ATHYN State PA Zip Code 19009-0491  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01111**  
 Amount of Each Receipt this Period  
 350.00

**C. MR. GERALD M. COLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 680 N. LAKE SHORE DRIVE  
 APARTMENT 824  
 City CHICAGO State IL Zip Code 60611-3052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ADVERTISING EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01112**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 476 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES ALLEN COLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2314 AVENUE D  
 City State Zip Code  
 FORT MADISON IA 52627-2354  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CLIMAX MOLYBDENUM METALLURGICAL ENGINEER  
 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  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01113**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. JAMES K. COLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7404 VISTA DEL ARROYO AVENUE NE  
 City State Zip Code  
 ALBUQUERQUE NM 87109-2941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 565.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01114**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JAMES K. COLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7404 VISTA DEL ARROYO AVENUE NE  
 City State Zip Code  
 ALBUQUERQUE NM 87109-2941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 565.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01115**  
 Amount of Each Receipt this Period  
 50.00

**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 477 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES K. COLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 7404 VISTA DEL ARROYO AVENUE NE

City	State	Zip Code
ALBUQUERQUE	NM	87109-2941

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
565.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01116**

Amount of Each Receipt this Period  
50.00

**B. MR. JAMES W. COLE**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 720

City	State	Zip Code
CORINTH	MS	38835-0720

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

Name of Employer	Occupation
SELF-EMPLOYED	MEDICAL DOCTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01117**

Amount of Each Receipt this Period  
250.00

**C. MS. JULIANNE COLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 151 KOONCE ROAD

City	State	Zip Code
CASTOR	LA	71016-4018

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

Name of Employer	Occupation
SELF - EMPLOYED	RANCHER

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  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01118**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 478 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. JULIANNE COLE**

Mailing Address 151 KOONCE ROAD

City State Zip Code  
CASTOR LA 71016-4018

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

Name of Employer Occupation  
SELF - EMPLOYED RANCHER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01119**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MS. ELAINE H. COLEMAN**

Mailing Address 125 JOHNSTON ROAD

City State Zip Code  
UPPER SAINT CLAIR PA 15241-2532

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
231.00

Date of Receipt  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01120**

Amount of Each Receipt this Period  
30.00

Full Name (Last, First, Middle Initial)  
**C. MS. ELAINE H. COLEMAN**

Mailing Address 125 JOHNSTON ROAD

City State Zip Code  
UPPER SAINT CLAIR PA 15241-2532

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
231.00

Date of Receipt  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01121**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 230.00

**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 479 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ELAINE H. COLEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 125 JOHNSTON ROAD  
 City State Zip Code  
 UPPER SAINT CLAIR PA 15241-2532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01122**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. ELAINE H. COLEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 125 JOHNSTON ROAD  
 City State Zip Code  
 UPPER SAINT CLAIR PA 15241-2532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01123**  
 Amount of Each Receipt this Period  
 1.00

**C. MRS. MYRA J. COLEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4520 EATON STREET  
 City State Zip Code  
 KANSAS CITY KS 66103-3529  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 C. & S. WOOD BOOKKEEPER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 590.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01124**  
 Amount of Each Receipt this Period  
 202.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 303.00  
**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 480 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BEVERLY L. COLES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 815 ENFIELD STREET  
 City BOCA RATON State FL Zip Code 33487-3118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01125**  
 Amount of Each Receipt this Period  
 120.00

**B. MRS. BEVERLY L. COLES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 815 ENFIELD STREET  
 City BOCA RATON State FL Zip Code 33487-3118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01126**  
 Amount of Each Receipt this Period  
 100.00

**C. DR. P. ANDREW COLEY JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2586 SPREADING OAKS LANE  
 City JACKSONVILLE State FL Zip Code 32223-6501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01127**  
 Amount of Each Receipt this Period  
 111.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	331.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 481 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DENNIS J. COLGAN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12 COVE ROAD  
 City MOORESTOWN State NJ Zip Code 08057-3950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BARTHCO INTL. INC. Occupation C.E.O.  
 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  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01128**  
 Amount of Each Receipt this Period  
 300.00

**B. MRS. BARBARA S. COLLIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 224 ADAMS TRAIL  
 City KEELING State VA Zip Code 24566-2112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01129**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. MICHAEL COLLIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 856 MOUNTAIN VIEW DRIVE  
 City LAFAYETTE State CA Zip Code 94549-4214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SGPA ARCHITECTURE & PLANNING Occupation ARCHITECT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01130**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 551.00  
**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 482 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENNETH COLLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2972 SAILOR AVENUE  
 City State Zip Code  
 VENTURA CA 93001-4156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI01131**  
 Amount of Each Receipt this Period  
 220.00

**B. MR. RICHARD E. COLLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 CROSSLEY DRIVE  
 City State Zip Code  
 DOVER DE 19901-5801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01132**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. GARY COLLINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5705 E. FARMRIDGE DRIVE  
 City State Zip Code  
 TUCSON AZ 85756-9799  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01133**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 520.00  
**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 483 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. LORETTA J. COLLINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 103 E. RITZMAN LANE  
 City KALISPELL State MT Zip Code 59901-2782  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01134**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. M. THOMAS COLLINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 206 DEERFIELD LANE  
 City FRANKLIN State TN Zip Code 37069-6011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01135**  
 Amount of Each Receipt this Period  
 500.00

**C. MRS. PAULINE COLLINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 56 INNISBROOK AVENUE  
 City LAS VEGAS State NV Zip Code 89113-1225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01136**  
 Amount of Each Receipt this Period  
 201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 484 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. PHYLLIS C. COLLINS</b>		Date of Receipt
Mailing Address 3240 LAKE POINTE BLVD. APARTMENT 339		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : 2014M04L11AI01137</b>
SARASOTA	FL	Amount of Each Receipt this Period
Zip Code		<input type="text" value="100.00"/>
34231-6960		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="201.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MS. PHYLLIS C. COLLINS</b>		Date of Receipt
Mailing Address 3240 LAKE POINTE BLVD. APARTMENT 339		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : 2014M04L11AI01138</b>
SARASOTA	FL	Amount of Each Receipt this Period
Zip Code		<input type="text" value="1.00"/>
34231-6960		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="201.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. REGINALD COLLINS</b>		Date of Receipt
Mailing Address 27255 S. 4120 ROAD		<input type="text" value="03"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : 2014M04L11AI01139</b>
CLAREMORE	OK	Amount of Each Receipt this Period
Zip Code		<input type="text" value="250.00"/>
74019-3350		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
SELF-EMPLOYED	BUSINESS OWNER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="700.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="351.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 485 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. REGINALD COLLINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27255 S. 4120 ROAD  
 City CLAREMORE State OK Zip Code 74019-3350  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01140**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. CHARLES COLLOM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 46647  
 City ST. PETE BEACH State FL Zip Code 33741-6647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01141**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. CHARLES COLLOM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 46647  
 City ST. PETE BEACH State FL Zip Code 33741-6647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01142**  
 Amount of Each Receipt this Period  
 150.00

**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 486 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. RALPH W. COLRUD</b>		Date of Receipt
Mailing Address 13343 W. PAINTBRUSH DRIVE		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
SUN CITY WEST	AZ	85375-2531
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI01143</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="101.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="201.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MRS. KATHLEEN B. COLSMAN</b>		Date of Receipt
Mailing Address 5044 N. CREST RIDGE DRIVE		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
TUCSON	AZ	85718-5624
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI01144</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	DISABLED	<input type="text" value="26.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="756.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MRS. KATHLEEN B. COLSMAN</b>		Date of Receipt
Mailing Address 5044 N. CREST RIDGE DRIVE		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
TUCSON	AZ	85718-5624
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI01145</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	DISABLED	<input type="text" value="705.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="756.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="832.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 487 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. IRA COMBS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4580 EAGLE DR  
 City JACKSON State MI Zip Code 49201-9746  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CCH INC. Occupation HEALTH CARE ADMIN.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01146**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. JOHN D. COMER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5300 ZEBULON ROAD APARTMENT 3101  
 City MACON State GA Zip Code 31210-9115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01147**  
 Amount of Each Receipt this Period  
 225.00

**C. MR. CHARLES A. CONKLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1105 CAMELLIA CIRCLE  
 City HOOVER State AL Zip Code 35226-5078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF - EMPLOYED Occupation SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01148**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1475.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 488 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES JOSEPH CONLON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1249 NW 125TH TERRACE  
 City State Zip Code  
 SUNRISE FL 33323-3178  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01149**  
 Amount of Each Receipt this Period  
 255.00

**B. MRS. DOROTHY M. CONNELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 935 OCEAN AVENUE  
 APARTMENT 319  
 City State Zip Code  
 OCEAN CITY NJ 08226-3561  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01150**  
 Amount of Each Receipt this Period  
 125.00

**C. MR. WAYNE L. CONNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1333 E. BRIARWOOD TERRACE  
 City State Zip Code  
 PHOENIX AZ 85048-8690  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01151**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 480.00  
**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 489 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN CONNERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 24 WESTWOOD ROAD

City NORTH FALMOUTH State MA Zip Code 02556-2240

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01152**

Amount of Each Receipt this Period  
 300.00

**B. CHRISTOPHER CONNOR**  
Full Name (Last, First, Middle Initial)

Mailing Address 46002 FALLS ROAD

City CHAGRIN FALLS State OH Zip Code 44022-2542

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

Name of Employer SHERWIN-WILLIAMS Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01153**

Amount of Each Receipt this Period  
 15000.00

**C. DR. JOHN P. CONNORS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1733 KENMONT ROAD

City SAINT LOUIS State MO Zip Code 63124-1021

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01154**

Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15420.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 490 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BERNICE M. CONRAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 RIDGEWAY DRIVE  
 City BRIDGEPORT State WV Zip Code 26330-1149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **365.00**

Date of Receipt: **03 / 11 / 2014**  
**Transaction ID : 2014M04L11AI01155**  
 Amount of Each Receipt this Period: **100.00**

**B. MRS. BERNICE M. CONRAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 RIDGEWAY DRIVE  
 City BRIDGEPORT State WV Zip Code 26330-1149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **365.00**

Date of Receipt: **03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI01156**  
 Amount of Each Receipt this Period: **95.00**

**C. MR. CLIFFORD CONRADT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N5057 PULS ROAD  
 City SHIOCTON State WI Zip Code 54170-9058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **SELF-EMPLOYED** Occupation: **FARMER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt: **03 / 19 / 2014**  
**Transaction ID : 2014M04L11AI01157**  
 Amount of Each Receipt this Period: **250.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **445.00**  
**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 491 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LARRY D. CONTOS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 755 ROMINE ROAD  
 City ANDERSON State IN Zip Code 46011-8704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01158**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. CARLOS A. CONTRERAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1045 IBIS AVENUE  
 City MIAMI SPRINGS State FL Zip Code 33166-3213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BIO NITROGEN CORP. Occupation CHAIRMAN & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI01159**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. CARLOS A. CONTRERAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1045 IBIS AVENUE  
 City MIAMI SPRINGS State FL Zip Code 33166-3213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BIO NITROGEN CORP. Occupation CHAIRMAN & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01160**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 270.00  
**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 492 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CARLOS A. CONTRERAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1045 IBIS AVENUE  
 City MIAMI SPRINGS State FL Zip Code 33166-3213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BIO NITROGEN CORP. Occupation CHAIRMAN & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01161**  
 Amount of Each Receipt this Period  
 110.00

**B. MR. BRUCE E. CONWAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 2050  
 City SANTA MARIA State CA Zip Code 93457-2050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INDEPENDENT OIL PRODUCER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01162**  
 Amount of Each Receipt this Period  
 405.00

**C. MR. GEORGE CONWAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12222 WILSHIRE BLVD.  
 APARTMENT 511  
 City LOS ANGELES State CA Zip Code 90025-1167  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CONWAY, INC Occupation DRILLING MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01163**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 616.00  
**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 493 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES RAY CONWAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5720 HALF MOON LAKE ROAD  
 City TAMPA State FL Zip Code 33625-1311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI01164**  
 Amount of Each Receipt this Period  
 300.00

**B. MRS. LINDA A. CONWAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 330 PAYSON ROAD  
 City BELMONT State MA Zip Code 02478-3403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation FINANCIAL CONSULTANT  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01165**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. FRANK COOK JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35 SHADOW POINT COURT  
 City EDGEWATER State MD Zip Code 21037-1212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HARBOR TRUCK SALES & SERVICE, INC. Occupation BUSINESS OWNER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01166**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 494 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE L. COOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1208  
 City PLACERVILLE State CA Zip Code 95667-1208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EL DORADO SAVINGS BANK Occupation BUSINESSMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01167**  
 Amount of Each Receipt this Period  
 50.00

**B. MRS. NORMA J. COOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1408 WINSTED DRIVE  
 City FALLSTON State MD Zip Code 21047-2215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01168**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. RICHARD ERNEST COOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2448 SILVER CLOUD DRIVE  
 City PARK CITY State UT Zip Code 84060-7051  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01169**  
 Amount of Each Receipt this Period  
 240.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 490.00  
**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 495 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS EDWIN COOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 105 RIVER OAK DRIVE  
 City INGRAM State TX Zip Code 78025-4000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01170**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. THOMAS EDWIN COOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 105 RIVER OAK DRIVE  
 City INGRAM State TX Zip Code 78025-4000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01171**  
 Amount of Each Receipt this Period  
 25.00

**C. MR. THOMAS EDWIN COOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 105 RIVER OAK DRIVE  
 City INGRAM State TX Zip Code 78025-4000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01172**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 146.00  
**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 496 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WAYNE COOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3531 LIBRARY ROAD  
 City CASTLE SHANNON State PA Zip Code 15234-2201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 391.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01173**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. WAYNE COOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3531 LIBRARY ROAD  
 City CASTLE SHANNON State PA Zip Code 15234-2201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 391.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01174**  
 Amount of Each Receipt this Period  
 101.00

**C. MS. ANNETTA J. COOKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1632 COUNTY ROAD 2360  
 City BAGWELL State TX Zip Code 75412-3214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01175**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	302.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 497 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. DR. JAMES COOKE**

Mailing Address 15 COUNTY ROAD 198

City State Zip Code  
OXFORD MS 38655-8620

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
204.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01176**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**B. DR. JAMES COOKE**

Mailing Address 15 COUNTY ROAD 198

City State Zip Code  
OXFORD MS 38655-8620

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

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
204.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01177**

Amount of Each Receipt this Period  
26.00

Full Name (Last, First, Middle Initial)  
**C. MR. JOHN R. COOKE**

Mailing Address 137 WAREHAM'S POINT

City State Zip Code  
WILLIAMSBURG VA 23185

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01178**

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 201.00

**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 498 OF 2949  
(check only one)  
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. DAVID COOKSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19750 BEACH ROAD  
 APARTMENT 206  
 City JUPITER State FL Zip Code 33469-2863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01179**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. CHARLES COON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6093 SE IRWIN ROAD  
 City CAMERON State MO Zip Code 64429-9144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01180**  
 Amount of Each Receipt this Period  
 105.00

**C. MR. DOUGLAS M. COON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 568  
 City MONTICELLO State FL Zip Code 32345-0568  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FLORIDA X-RAY TROUP. Occupation C. E. O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01181**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 405.00  
**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 499 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DOUGLAS M. COON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 568  
 City MONTICELLO State FL Zip Code 32345-0568  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FLORIDA X-RAY TROUP. Occupation C. E. O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01182**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. BERNARD COONEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3613 JOHN CARROLL DRIVE  
 City OLNEY State MD Zip Code 20832-2216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01183**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. DAVID COOPER U.S.A.F. (**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16080 FARM 1541  
 City CANYON State TX Zip Code 79015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01184**  
 Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 335.00  
**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 500 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID COOPER U.S.A.F. (**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16080 FARM 1541  
 City CANYON State TX Zip Code 79015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01185**  
 Amount of Each Receipt this Period  
 60.00

**B. MR. DAVID COOPER U.S.A.F. (**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16080 FARM 1541  
 City CANYON State TX Zip Code 79015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01186**  
 Amount of Each Receipt this Period  
 35.00

**C. MRS. MARY LOU COOPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4075 N. W. 100TH AVENUE  
 City CORAL SPRINGS State FL Zip Code 33065-1548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation SMALL BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01187**  
 Amount of Each Receipt this Period  
 301.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 396.00  
**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 501 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD A. COOPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 FOUR LEAF MANOR  
 City REXFORD State NY Zip Code 12148-1490  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01188**  
 Amount of Each Receipt this Period  
 150.00

**B. MR. RICHARD A. COOPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 FOUR LEAF MANOR  
 City REXFORD State NY Zip Code 12148-1490  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01189**  
 Amount of Each Receipt this Period  
 100.00

**C. DR. THOMAS J. COOPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7353 OLD JACKSON ROAD  
 City FARMINGTON State MO Zip Code 63640-8520  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01190**  
 Amount of Each Receipt this Period  
 111.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	361.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 502 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. WILLIAM W. COOPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 CEDAR CREEK ROAD  
 City State Zip Code  
 SUDBURY MA 01776-1004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01191**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. J. LEWIS COOPER, JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 743 LOCHMOOR BLVD.  
 City State Zip Code  
 GROSE POINTE WOODS MI 48236-4008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 GREAT LAKES WINE & SPIRITS LLC OFFICER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01192**  
 Amount of Each Receipt this Period  
 501.00

**C. MR. JOHN A. COPELAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10100 CYPRESS COVE DRIVE  
 APARTMENT 372  
 City State Zip Code  
 FORT MYERS FL 33908-7667  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01193**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 851.00  
**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 503 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JOAN P. COPPOTELLI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 E. 58TH STREET  
 City NEW YORK State NY Zip Code 10022-2317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **03 / 05 / 2014**  
**Transaction ID : 2014M04L11AI01194**  
 Amount of Each Receipt this Period: **100.00**

**B. MRS. JOAN P. COPPOTELLI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 E. 58TH STREET  
 City NEW YORK State NY Zip Code 10022-2317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI01195**  
 Amount of Each Receipt this Period: **100.00**

**C. MS. BETTYE J. CORBIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 321 W. BLUERIDGE DRIVE  
 City MIDWEST CITY State OK Zip Code 73110-3768  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **206.00**

Date of Receipt: **03 / 03 / 2014**  
**Transaction ID : 2014M04L11AI01196**  
 Amount of Each Receipt this Period: **120.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>320.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 504 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. BETTYE J. CORBIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 321 W. BLUERIDGE DRIVE  
 City State Zip Code  
 MIDWEST CITY OK 73110-3768  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01197**  
 Amount of Each Receipt this Period  
 21.00

**B. MS. BETTYE J. CORBIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 321 W. BLUERIDGE DRIVE  
 City State Zip Code  
 MIDWEST CITY OK 73110-3768  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01198**  
 Amount of Each Receipt this Period  
 20.00

**C. MR. DANIEL J. CORCORAN SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1547 BENSON STREET  
 City State Zip Code  
 BRONX NY 10461-3101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NEW YORK RACING ASSOCIATION CLERK  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01199**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	151.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 505 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DANIEL J. CORCORAN SR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 1547 BENSON STREET

City BRONX State NY Zip Code 10461-3101

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

Name of Employer NEW YORK RACING ASSOCIATION Occupation CLERK

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01200**

Amount of Each Receipt this Period 1.00

**B. MRS. BETTY COREY**  
Full Name (Last, First, Middle Initial)

Mailing Address 3380 ACORN LANE S.

City SALEM State OR Zip Code 97302-5901

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01201**

Amount of Each Receipt this Period 130.00

**C. MRS. KAREN CORLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 3 WINDMILL WAY

City GREENVILLE State SC Zip Code 29615-6150

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

Name of Employer BOWING Occupation PROJECT COORDINATAR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01202**

Amount of Each Receipt this Period 265.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 396.00

**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 506 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY L. CORLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 390 OLIVER ROAD  
 City CINCINNATI State OH Zip Code 45215-2615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01203**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. DOYLE CORMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 126 WATEREE DRIVE  
 City SANTEE State SC Zip Code 29142-9308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer R.J. CORMAN RAILROAD GROUP Occupation GOVERNMENT AFFAIRS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01204**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. A. R. CORNE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 ABERDEEN DRIVE  
 City LAFAYETTE State LA Zip Code 70508-4853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01205**  
 Amount of Each Receipt this Period  
 150.00

**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 507 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD H. CORNEAL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 341 GREENFIELD ROAD  
 City WINTER HAVEN State FL Zip Code 33884-1311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01206**  
 Amount of Each Receipt this Period 120.00

**B. MR. WALTER D. CORNELIUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 222 VERSAILLES LANE  
 City KELLER State TX Zip Code 76248-2118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01207**  
 Amount of Each Receipt this Period 125.00

**C. MR. EDWARD PAUL CORNET**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 129  
 City COROLLA State NC Zip Code 27927-0129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNEMPLOYED Occupation UNEMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01208**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 345.00  
**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 508 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. G. THOMAS CORNETT**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2555 FLINTRIDGE ROAD

City GAINESVILLE	State GA	Zip Code 30501-7426
---------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation TRANSPORTATION
-----------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01209**

Amount of Each Receipt this Period  
 100.00

**B. MR. G. THOMAS CORNETT**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2555 FLINTRIDGE ROAD

City GAINESVILLE	State GA	Zip Code 30501-7426
---------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation TRANSPORTATION
-----------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01210**

Amount of Each Receipt this Period  
 100.00

**C. MR. G. THOMAS CORNETT**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2555 FLINTRIDGE ROAD

City GAINESVILLE	State GA	Zip Code 30501-7426
---------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation TRANSPORTATION
-----------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01211**

Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 509 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. J. PAT CORRIGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7150 20TH STREET  
 SUITE E.  
 City VERO BEACH State FL Zip Code 32966-8805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01212**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. PAUL A. CORRIGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26980 CRESTWOOD DRIVE  
 City FRANKLIN State MI Zip Code 48025-1378  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CORRIGAN MOVING SYSTEMS Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01213**  
 Amount of Each Receipt this Period  
 1100.00

**C. MR. MAGDALENO B. CORTES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 830 W. SUFFOLK AVENUE  
 City MONTEBELLO State CA Zip Code 90640-2542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01214**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 510 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ANTHONY J. CORTESI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6540 W. DEVON AVENUE  
 City CHICAGO State IL Zip Code 60631-2038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WALGREENS Occupation PHARMACIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01215**  
 Amount of Each Receipt this Period 121.00

**B. MR. ROBERT R. CORTEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8422 SPARKLING SPRINGS DRIVE  
 City HOUSTON State TX Zip Code 77095-3811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ROCKCORE Occupation WELDER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01216**  
 Amount of Each Receipt this Period 300.00

**C. MR. WILLIAM J. CORVINO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 127 EDGWOOD AVENUE  
 City AUDUBON State NJ Zip Code 08106-2011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 253.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01217**  
 Amount of Each Receipt this Period 30.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 451.00  
**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 511 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM J. CORVINO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 127 EDGWOOD AVENUE  
 City State Zip Code  
 AUDUBON NJ 08106-2011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 253.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01218**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. WILLIAM J. CORVINO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 127 EDGWOOD AVENUE  
 City State Zip Code  
 AUDUBON NJ 08106-2011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 253.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01219**  
 Amount of Each Receipt this Period  
 40.00

**C. MR. WILLIAM J. CORVINO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 127 EDGWOOD AVENUE  
 City State Zip Code  
 AUDUBON NJ 08106-2011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 253.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01220**  
 Amount of Each Receipt this Period  
 31.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 121.00  
**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 512 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM J. CORVINO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 127 EDGWOOD AVENUE  
 City State Zip Code  
 AUDUBON NJ 08106-2011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 253.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01221**  
 Amount of Each Receipt this Period  
 42.00

**B. MR. ROBERT K. COSSELMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32802 LEAH DRIVE  
 City State Zip Code  
 DANA POINT CA 92629-1063  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED CONSULTANT  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01222**  
 Amount of Each Receipt this Period  
 85.00

**C. MR. THEO P. COSTAS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1349  
 City State Zip Code  
 JACKSON MS 39215-1349  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PRESIDENT  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01223**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1127.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 513 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY L. COSTELLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 215 HAWKSWORTH ROAD  
 City Greensburg State PA Zip Code 15601-1531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **255.00**

Date of Receipt **03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI01224**  
 Amount of Each Receipt this Period **105.00**

**B. MR. PATRICK MICHAEL COSTELLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2436 DORCHESTER APARTMENT 384  
 City Port Huron State MI Zip Code 48060-4526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **230.00**

Date of Receipt **03 / 06 / 2014**  
**Transaction ID : 2014M04L11AI01225**  
 Amount of Each Receipt this Period **35.00**

**C. MR. PATRICK MICHAEL COSTELLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2436 DORCHESTER APARTMENT 384  
 City Port Huron State MI Zip Code 48060-4526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **230.00**

Date of Receipt **03 / 07 / 2014**  
**Transaction ID : 2014M04L11AI01226**  
 Amount of Each Receipt this Period **25.00**

**SUBTOTAL** of Receipts This Page (optional)..... **165.00**  
**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 514 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PATRICK MICHAEL COSTELLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2436 DORCHESTER  
 APARTMENT 384  
 City PORT HURON State MI Zip Code 48060-4526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01227**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. PATRICK MICHAEL COSTELLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2436 DORCHESTER  
 APARTMENT 384  
 City PORT HURON State MI Zip Code 48060-4526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01228**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. PATRICK MICHAEL COSTELLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2436 DORCHESTER  
 APARTMENT 384  
 City PORT HURON State MI Zip Code 48060-4526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01229**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 170.00  
**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 515 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN L. COTTAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 274 E. SKYLINE CIR.

City WASHINGTON State UT Zip Code 84780-2531

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

Name of Employer INDUSTRIAL BRUSH CORPORATION Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 17 / 2014  
Transaction ID : 2014M04L11AI01230

Amount of Each Receipt this Period 300.00

**B. MR. GENE COTTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 4511 WILLOWICK BLVD.

City ALEXANDRIA State LA Zip Code 71303-2534

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

Name of Employer RAYMOND JAMES Occupation FINANCIAL PLANNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt 03 / 24 / 2014  
Transaction ID : 2014M04L11AI01231

Amount of Each Receipt this Period 122.00

**C. MR. GENE COTTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 4511 WILLOWICK BLVD.

City ALEXANDRIA State LA Zip Code 71303-2534

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

Name of Employer RAYMOND JAMES Occupation FINANCIAL PLANNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt 03 / 25 / 2014  
Transaction ID : 2014M04L11AI01232

Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 522.00

**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 516 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. JACK B. COULTER JR.</b>		Date of Receipt
Mailing Address 262 KELSEY PARK CIRCLE		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City	State	Zip Code
PALM BEACH GARDENS	FL	33410-3200
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI01233</b>
Name of Employer SELF-EMPLOYED		Amount of Each Receipt this Period
Occupation FINANCIAL PLANNER		101.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	201.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. ROBERT S. COULTER</b>		Date of Receipt
Mailing Address 608 E. DEERFIELD STREET		M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014
City	State	Zip Code
SPRINGFIELD	MO	65807-5014
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI01234</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		30.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	207.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. ROBERT S. COULTER</b>		Date of Receipt
Mailing Address 608 E. DEERFIELD STREET		M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014
City	State	Zip Code
SPRINGFIELD	MO	65807-5014
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI01235</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		50.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	207.00	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	181.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 517 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT S. COULTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 608 E. DEERFIELD STREET  
 City SPRINGFIELD State MO Zip Code 65807-5014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01236**  
 Amount of Each Receipt this Period 32.00

**B. MR. CHESTER J. COURTNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2784 POST STREET  
 City JACKSONVILLE State FL Zip Code 32205-7622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01237**  
 Amount of Each Receipt this Period 250.00

**C. MR. CHESTER J. COURTNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2784 POST STREET  
 City JACKSONVILLE State FL Zip Code 32205-7622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01238**  
 Amount of Each Receipt this Period 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	332.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 518 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. EUNICE J. COURTNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12600 N. PORT WASHINGTON ROAD  
 City MEQUON State WI Zip Code 53092-3469  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01239**  
 Amount of Each Receipt this Period  
 50.00

**B. MRS. EUNICE J. COURTNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12600 N. PORT WASHINGTON ROAD  
 City MEQUON State WI Zip Code 53092-3469  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01240**  
 Amount of Each Receipt this Period  
 100.00

**C. DR. WILLIAM B. COURTNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 908 KUNKLE DRIVE  
 City GREENSBURG State PA Zip Code 15601-1338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01241**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00  
**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 519 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. WILLIAM B. COURTNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 908 KUNKLE DRIVE  
 City GREENSBURG State PA Zip Code 15601-1338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01242**  
 Amount of Each Receipt this Period  
 1.00

**B. PETER COWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 661 W GUIBERSON RD  
 City FILLMORE State CA Zip Code 93015-9795  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01243**  
 Amount of Each Receipt this Period  
 255.00

**C. MS. PHOEBE COWLES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1090 CHESTNUT STREET APARTMENT 8  
 City SAN FRANCISCO State CA Zip Code 94109-1230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01244**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	506.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 520 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. PHOEBE COWLES**  
Full Name (Last, First, Middle Initial)

Mailing Address 1090 CHESTNUT STREET  
APARTMENT 8

City SAN FRANCISCO State CA Zip Code 94109-1230

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
601.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01245**

Amount of Each Receipt this Period  
100.00

**B. MS. PHOEBE COWLES**  
Full Name (Last, First, Middle Initial)

Mailing Address 1090 CHESTNUT STREET  
APARTMENT 8

City SAN FRANCISCO State CA Zip Code 94109-1230

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
601.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01246**

Amount of Each Receipt this Period  
251.00

**C. MR. DARRELL A. COX**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2057

City SLIDELL State LA Zip Code 70459-2057

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

Name of Employer MULTITECH OFFICE MACHINES Occupation EXECUTIVE MANAGEMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01247**

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1851.00

**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 521 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. CHAIRMAN EDWARD F. COX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1133 AVENUE OF THE AMERICAS  
 City NEW YORK State NY Zip Code 10036-6710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NY REPUBLICAN STATE COMMITTEE Occupation CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 22200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01248**  
 Amount of Each Receipt this Period  
 22200.00

**B. MS. JANETTA A. COX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2401 S. 7TH AVENUE  
 City OZARK State MO Zip Code 65721-7398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01249**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. RICHARD H. COX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1951 KAKELA DRIVE  
 City HONOLULU State HI Zip Code 96822-2156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01250**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 22501.00  
**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 522 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD H. COX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1951 KAKELA DRIVE  
 City HONOLULU State HI Zip Code 96822-2156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01251**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. HENRY B. COXE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1638 E. BUTLER PIKE  
 City AMBLER State PA Zip Code 19002-2825  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI01252**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. PETER T. COYLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4921 N. GLEN PARK PLACE ROAD  
 City PEORIA State IL Zip Code 61614-4676  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INSURANCE SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01253**  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1051.00  
**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 523 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANK COYNE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 41 GORWIN DRIVE  
 City HANSON State MA Zip Code 02341-1309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SHAW'S SUPERMARKET Occupation GROCERY CLERK  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01254**  
 Amount of Each Receipt this Period 30.00

**B. MR. FRANK COYNE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 41 GORWIN DRIVE  
 City HANSON State MA Zip Code 02341-1309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SHAW'S SUPERMARKET Occupation GROCERY CLERK  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01255**  
 Amount of Each Receipt this Period 35.00

**C. MR. FRANK COYNE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 41 GORWIN DRIVE  
 City HANSON State MA Zip Code 02341-1309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SHAW'S SUPERMARKET Occupation GROCERY CLERK  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01256**  
 Amount of Each Receipt this Period 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 120.00  
**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 524 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANK COYNE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 41 GORWIN DRIVE  
 City HANSON State MA Zip Code 02341-1309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SHAW'S SUPERMARKET Occupation GROCERY CLERK  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01257**  
 Amount of Each Receipt this Period  
 56.00

**B. MR. GARY CRAFT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8115 56TH STREET N.W.  
 City STANLEY State ND Zip Code 58784-9569  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01258**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. GARY CRAFT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8115 56TH STREET N.W.  
 City STANLEY State ND Zip Code 58784-9569  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01259**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 276.00  
**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 525 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES CRAFTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 606  
 City EVERGREEN State CO Zip Code 80437-0606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PERFORMANCE SCIENCES, INC. Occupation PETROLEUM ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01260**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. CHARLES E. CRAIG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10123 METRONOME DRIVE  
 City HOUSTON State TX Zip Code 77080-6311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CRAIG & HELD, INC. Occupation SUPERVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01261**  
 Amount of Each Receipt this Period  
 300.00

**C. MRS. JUDITH CRAIG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1204 LAWSON AVENUE  
 City MIDLAND State TX Zip Code 79701-4044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MATTHEWS-LINK PROPERTIES Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI01262**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00  
**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 526 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JUDITH CRAIG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1204 LAWSON AVENUE  
 City MIDLAND State TX Zip Code 79701-4044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MATTHEWS-LINK PROPERTIES Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI01263**  
 Amount of Each Receipt this Period  
 120.00

**B. MS. LAURA CRAIG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3395 WEST CHEYENNE AVENUE SUITE 102  
 City NORTH LAS VEGAS State NV Zip Code 89032-8210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer C. MARTIN COMPANY Occupation D.O.D. CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01264**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. EDDIE R. CRAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1406 LINCOLN COURT  
 City MOUNT PLEASANT State MI Zip Code 48858-1956  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MICHIGAN WIRELINE Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01265**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	920.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 527 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SUSAN R. CRAIN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7182 CHAMPIONS LANE  
City WEST CHESTER State OH Zip Code 45069-4634  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF-EMPLOYED Occupation CERTIFIED PUBLIC ACCOUNTANT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 660.00

Date of Receipt 03 / 04 / 2014  
Transaction ID : 2014M04L11AI01266  
Amount of Each Receipt this Period 250.00

**B. MR. RICHARD CRAMER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 24800 CHRISANTA DRIVE SUITE 130  
City MISSION VIEJO State CA Zip Code 92691-4834  
FEC ID number of contributing federal political committee. **C**  
Name of Employer REMOSE MANAGEMENT INC. Occupation ACCOUNTANT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 05 / 2014  
Transaction ID : 2014M04L11AI01267  
Amount of Each Receipt this Period 330.00

**C. MS. MARCIA B. CRAMP**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2000 CAMBRAIDGE AVENUE APARTMENT 217  
City WYOMISSING State PA Zip Code 19610-2734  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 17 / 2014  
Transaction ID : 2014M04L11AI01268  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1080.00  
**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 528 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. NANCY M. CRANDALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 44836 WINGED FOOT DRIVE  
 City INDIAN WELLS State CA Zip Code 92210-7600  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01269**  
 Amount of Each Receipt this Period 375.00

**B. MR. GUY R. CRANE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 77 E WALTON ST, APT 26C UNIT 26C  
 City CHICAGO State IL Zip Code 60611-2299  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01270**  
 Amount of Each Receipt this Period 250.00

**C. MR. GUY R. CRANE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 77 E WALTON ST, APT 26C UNIT 26C  
 City CHICAGO State IL Zip Code 60611-2299  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01271**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 725.00  
**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 529 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. KATHLEEN M. CRANE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 218 E. FALLEN ROCK ROAD  
 City GRAND JUNCTION State CO Zip Code 81507-1131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01272**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. SIDNEY F. CRANE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 360 E. LAKE DRIVE  
 City EDWARDSVILLE State IL Zip Code 62025-4255  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01273**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. WILLIAM S. CRANE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 265 MEETING HOUSE LANE  
 City MOUNTAINSIDE State NJ Zip Code 07092-1305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CRANE,TONELLI,ROSENBERG LLP Occupation C.P.A.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01274**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00  
**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 530 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM M. CRANSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17 OAK CRESCENT STREET  
 City POUGHKEEPSIE State NY Zip Code 12601-4911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE BROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01275**  
 Amount of Each Receipt this Period  
 90.00

**B. MR. THEODORE CRAVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 INDIAN HILL LANE  
 City HILTON HEAD State SC Zip Code 29926-1259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01276**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. ALDEN R. CRAWFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 737 ANCHOR RODE DRIVE  
 City NAPLES State FL Zip Code 34103-2721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 616.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01277**  
 Amount of Each Receipt this Period  
 116.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 306.00  
**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 531 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALDEN R. CRAWFORD JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 737 ANCHOR RODE DRIVE  
 City State Zip Code  
 NAPLES FL 34103-2721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01278**  
 Amount of Each Receipt this Period  
 1000.00

**B. MRS. BETTIE H. CRAWFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4555 E. MAYO BLVD.  
 UNIT 29101  
 City State Zip Code  
 PHOENIX AZ 85050-6994  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 660.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01279**  
 Amount of Each Receipt this Period  
 220.00

**C. MRS. BETTIE H. CRAWFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4555 E. MAYO BLVD.  
 UNIT 29101  
 City State Zip Code  
 PHOENIX AZ 85050-6994  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 660.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01280**  
 Amount of Each Receipt this Period  
 220.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1440.00  
**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 532 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN CRAWFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 255 PORTER ORCHARD LANE  
 City HOPEWELL State OH Zip Code 43746-9760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MAR ZANE MATERIALS Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01281**  
 Amount of Each Receipt this Period  
 101.00

**B. MR. JOSEPH S. CRAWFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 160 JAMESON WAY  
 City SEVEN FIELDS State PA Zip Code 16046-4328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01282**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. WILLIAM CRAWFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3313 EDEN PARK DRIVE  
 City CARMEL State IN Zip Code 46033-3038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01283**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1351.00  
**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 533 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MISS RUTH MARY CRAYFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 61 SUNRISE DRIVE  
 City RANCHO MIRAGE State CA Zip Code 92270-3845  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01284**  
 Amount of Each Receipt this Period  
 120.00

**B. MISS RUTH MARY CRAYFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 61 SUNRISE DRIVE  
 City RANCHO MIRAGE State CA Zip Code 92270-3845  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01285**  
 Amount of Each Receipt this Period  
 45.00

**C. MISS RUTH MARY CRAYFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 61 SUNRISE DRIVE  
 City RANCHO MIRAGE State CA Zip Code 92270-3845  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01286**  
 Amount of Each Receipt this Period  
 45.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 210.00  
**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 534 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD M. CREE**  
Full Name (Last, First, Middle Initial)

Mailing Address 4900 GLENWOOD DRIVE

City RIVERSIDE	State CA	Zip Code 92501-3908
-------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2014

**Transaction ID : 2014M04L11AI01287**

Amount of Each Receipt this Period  
61.00

**B. DR. MICHAEL A. CREMER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1482 HOLLOW FORK COVE

City GERMANTOWN	State TN	Zip Code 38138-1719
--------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2014

**Transaction ID : 2014M04L11AI01288**

Amount of Each Receipt this Period  
50.00

**C. MR. WILLIAM M. CREPEAU**  
Full Name (Last, First, Middle Initial)

Mailing Address 6030 CLUB OAKS DRIVE

City DALLAS	State TX	Zip Code 75248-1152
----------------	-------------	------------------------

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

Name of Employer CHARTER FURNITURE	Occupation RETAIL
---------------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : 2014M04L11AI01289**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	361.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 535 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CONSTANCE CRESS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1958 BOULDER DRIVE  
 City ANN ARBOR State MI Zip Code 48104-4164  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **415.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI01290**  
 Amount of Each Receipt this Period  
**415.00**

**B. MR. RONALD CRIGHTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 714 RED WING ROAD  
 City SIDNEY State MT Zip Code 59270-9015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **SELF-EMPLOYED** Occupation: **RANCHER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI01291**  
 Amount of Each Receipt this Period  
**55.00**

**C. MR. ROGER CARTER CRITTENDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2284 IVY CREST LANE S.E.  
 City SMYRNA State GA Zip Code 30080-6647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **REQUESTED** Occupation: **REQUESTED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 26 / 2014**  
**Transaction ID : 2014M04L11AI01292**  
 Amount of Each Receipt this Period  
**200.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **670.00**  
**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 536 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN F. CROCKETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1005 N.E. 17TH AVENUE  
 APARTMENT 202  
 City HillsBORO State OR Zip Code 97124-2871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1221.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01293**  
 Amount of Each Receipt this Period 150.00

**B. MR. JOHN F. CROCKETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1005 N.E. 17TH AVENUE  
 APARTMENT 202  
 City HillsBORO State OR Zip Code 97124-2871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1221.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01294**  
 Amount of Each Receipt this Period 486.00

**C. MRS. BRIGITTE B. CROMWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8 STONY LANE  
 City NORWALK State CT Zip Code 06850-4307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01295**  
 Amount of Each Receipt this Period 90.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 726.00  
**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 537 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. BRIGITTE B. CROMWELL</b>		Date of Receipt
Mailing Address 8 STONY LANE		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
NORWALK	CT	06850-4307
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI01296</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	
HOMEMAKER	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="206.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MRS. BRIGITTE B. CROMWELL</b>		Date of Receipt
Mailing Address 8 STONY LANE		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
NORWALK	CT	06850-4307
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI01297</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="31.00"/>
Name of Employer	Occupation	
HOMEMAKER	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="206.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. JAMES W. CRONEY SR.</b>		Date of Receipt
Mailing Address 2034 E. 15TH STREET		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
BROOKLYN	NY	11229-3310
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI01298</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="121.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="361.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="182.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 538 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. DR. HERB CRONIN</b>		Date of Receipt
Mailing Address 2808 LACY LANE		M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014
City	State	Zip Code
SACRAMENTO	CA	95821-6006
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI01299</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		165.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	275.00	

Full Name (Last, First, Middle Initial) <b>B. MR. VAUGHN E. CROSS</b>		Date of Receipt
Mailing Address 1010 STUART STREET		M M M / D D D / Y Y Y Y Y Y 03 / 12 / 2014
City	State	Zip Code
PINEDALE	WY	82941
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI01300</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		150.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	256.00	

Full Name (Last, First, Middle Initial) <b>C. MR. VAUGHN E. CROSS</b>		Date of Receipt
Mailing Address 1010 STUART STREET		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City	State	Zip Code
PINEDALE	WY	82941
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI01301</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		106.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	256.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	421.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 539 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ANNETTE CROTTA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 831 KALLI CREEK LANE  
 City SAINT AUGUSTINE State FL Zip Code 32080-5816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01302**  
 Amount of Each Receipt this Period 56.00

**B. MRS. JUDITH H. CROW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3170 WOODLEIGH LANE  
 City CAMERON PARK State CA Zip Code 95682-8127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 326.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01303**  
 Amount of Each Receipt this Period 135.00

**C. MRS. JUDITH H. CROW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3170 WOODLEIGH LANE  
 City CAMERON PARK State CA Zip Code 95682-8127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 326.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01304**  
 Amount of Each Receipt this Period 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 226.00  
**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 540 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JUDITH H. CROW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3170 WOODLEIGH LANE  
 City CAMERON PARK State CA Zip Code 95682-8127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 326.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01305**  
 Amount of Each Receipt this Period  
 36.00

**B. MRS. ELIZABETH A. CROWE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 215 BENTLEY DRIVE  
 City NAPLES State FL Zip Code 34110-8627  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01306**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. KAY I. CROWE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4867 PLEASANT VALLEY DRIVE  
 City COLUMBUS State OH Zip Code 43220-5410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01307**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 236.00  
**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 541 OF 2949 (check only one)
<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KAY I. CROWE**  
Full Name (Last, First, Middle Initial)

Mailing Address 4867 PLEASANT VALLEY DRIVE

City COLUMBUS	State OH	Zip Code 43220-5410
------------------	-------------	------------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01308**

Amount of Each Receipt this Period  
 101.00

**B. MR. JACK CROWELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 3760 SAINT ANDREWS DRIVE

City RENO	State NV	Zip Code 89502-9612
--------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI01309**

Amount of Each Receipt this Period  
 100.00

**C. MR. JAMES L. CROWLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 415 W. HAMILTON AVENUE  
P.O. BOX 38

City SHERRILL	State NY	Zip Code 13461-1335
------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01310**

Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	221.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 542 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES L. CROWLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 415 W. HAMILTON AVENUE  
 P.O. BOX 38  
 City SHERRILL State NY Zip Code 13461-1335  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01311**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. JAMES L. CROWLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 415 W. HAMILTON AVENUE  
 P.O. BOX 38  
 City SHERRILL State NY Zip Code 13461-1335  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01312**  
 Amount of Each Receipt this Period  
 2.00

**C. MR. JOHN E. CROWLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4002 RIVER PARK DRIVE  
 City SUFFOLK State VA Zip Code 23435-3355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer APM TERMINALS Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01313**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 152.00  
**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 543 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FERREL GENE CRUTCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1764 BOULDERS DRIVE  
 City LAS CRUCES State NM Zip Code 88011-4061  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01314**  
 Amount of Each Receipt this Period 1.00

**B. MR. JOSE T. CRUZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 504 SNAPPER COVE  
 City KILLEEN State TX Zip Code 76542-2652  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01315**  
 Amount of Each Receipt this Period 55.00

**C. MR. LASZLO CSERNAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2509 E. CHERRYWOOD PLACE  
 City CHANDLER State AZ Zip Code 85249-3522  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ANESTH. RESOURCES, L.T.D. Occupation ANESTHESIOLOGIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01316**  
 Amount of Each Receipt this Period 460.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 516.00  
**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 544 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. GREGORY C. CUCA**

Mailing Address 500 MONTAUK DRIVE

City WESTFIELD      State NJ      Zip Code 07090-2710

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

Name of Employer MERCK RESEARCH LAB      Occupation BROKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01317**

Amount of Each Receipt this Period  
75.00

Full Name (Last, First, Middle Initial)  
**B. MR. REID T. CULBERSON**

Mailing Address 4708 S.E. MIZNER PLACE

City STUART      State FL      Zip Code 34997-2173

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

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
635.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01318**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. DR. FRED CULLER**

Mailing Address P.O. BOX 676

City VAN WERT      State OH      Zip Code 45891-0676

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

Name of Employer SELF-EMPLOYED      Occupation ANESTHESIOLOGIST

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01319**

Amount of Each Receipt this Period  
100.00

**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 545 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. KENNETH CULP**

Mailing Address 3496 S150 W.

City RENSSELAER      State IN      Zip Code 47978

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED      Occupation FARMING

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01320**

Amount of Each Receipt this Period  
90.00

Full Name (Last, First, Middle Initial)  
**B. MR. KENNETH CULP**

Mailing Address 3496 S150 W.

City RENSSELAER      State IN      Zip Code 47978

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED      Occupation FARMING

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01321**

Amount of Each Receipt this Period  
90.00

Full Name (Last, First, Middle Initial)  
**C. MR. KENNETH CULP**

Mailing Address 3496 S150 W.

City RENSSELAER      State IN      Zip Code 47978

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED      Occupation FARMING

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01322**

Amount of Each Receipt this Period  
1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 181.00

**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 546 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM H. CULPEPPER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 708 NOTTINGHAM COURT  
 City State Zip Code  
 CARMEL IN 46032-9676  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SEPRO CORPORATION PRESIDENT  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01323**  
 Amount of Each Receipt this Period  
 110.00

**B. MR. ROBERT RONALD CUMINALE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 912 INGRAHAM PLACE  
 City State Zip Code  
 CHARLOTTE NC 28270-1039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 242.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01324**  
 Amount of Each Receipt this Period  
 36.00

**C. MR. ROBERT RONALD CUMINALE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 912 INGRAHAM PLACE  
 City State Zip Code  
 CHARLOTTE NC 28270-1039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 242.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01325**  
 Amount of Each Receipt this Period  
 35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	181.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 547 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT RONALD CUMINALE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 912 INGRAHAM PLACE  
 City CHARLOTTE State NC Zip Code 28270-1039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01326**  
 Amount of Each Receipt this Period  
 36.00

**B. MRS. JANICE W. CUMMINGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 204 CLARENDON ROAD  
 P.O. BOX 168  
 City ALBION State NY Zip Code 14411-9542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01327**  
 Amount of Each Receipt this Period  
 200.00

**C. MRS. JANICE W. CUMMINGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 204 CLARENDON ROAD  
 P.O. BOX 168  
 City ALBION State NY Zip Code 14411-9542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01328**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	286.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 548 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN CUMMINGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 126 STONEHEDGE CIRCLE  
 City BROOKVILLE State PA Zip Code 15825-2642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI01329**  
 Amount of Each Receipt this Period  
 300.00

**B. C. R. CUNNINGHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18290 BIRCHCREST DRIVE  
 City DETROIT State MI Zip Code 48221-2751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01330**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. JOSEPH PAYNE CUNNINGHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1830 WILLIAMS AVENUE  
 City NATCHITOCHE State LA Zip Code 71457-5321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01331**  
 Amount of Each Receipt this Period  
 220.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	770.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 549 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. PATRICK C. CUNNINGHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2706 29TH AVENUE  
 City State Zip Code  
 ROCK ISLAND IL 61201-5447  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 305.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01332**  
 Amount of Each Receipt this Period  
 305.00

**B. MR. THOMAS A. CUPO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 CHESTNUT RIDGE COURT  
 City State Zip Code  
 LITTLE FALLS NJ 07424-2450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED INSURANCE & REAL ESTATE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01333**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. RICHARD L. CURL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 250 FRYE ROAD  
 City State Zip Code  
 PINEHURST NC 28374-8956  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01334**  
 Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 516.00  
**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 550 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JUDITH CURRAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 101 GREEN RIDGE ROAD

City VOORHEES State NJ Zip Code 08043-1255

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01335**

Amount of Each Receipt this Period  
 221.00

**B. MRS. MADELYN A. CURRY**  
Full Name (Last, First, Middle Initial)

Mailing Address 3713 TEMPLETON PLACE

City ALEXANDRIA State VA Zip Code 22304-1837

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 496.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI01336**

Amount of Each Receipt this Period  
 120.00

**C. MRS. MADELYN A. CURRY**  
Full Name (Last, First, Middle Initial)

Mailing Address 3713 TEMPLETON PLACE

City ALEXANDRIA State VA Zip Code 22304-1837

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 496.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01337**

Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	461.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 551 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MADELYN A. CURRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3713 TEMPLETON PLACE  
 City ALEXANDRIA State VA Zip Code 22304-1837  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: HOMEMAKER Occupation: HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 496.00

Date of Receipt: 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01338**  
 Amount of Each Receipt this Period: 121.00

**B. MR. HAROLD B. CURTIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 415 RUSSELL AVENUE APARTMENT 512  
 City GAITHERSBURG State MD Zip Code 20877-2849  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: RETIRED Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI01339**  
 Amount of Each Receipt this Period: 100.00

**C. MR. HAROLD B. CURTIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 415 RUSSELL AVENUE APARTMENT 512  
 City GAITHERSBURG State MD Zip Code 20877-2849  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: RETIRED Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01340**  
 Amount of Each Receipt this Period: 190.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	411.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 552 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CHERYL CUSAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2230 S. PINEY POINT ROAD #217  
 City HOUSTON State TX Zip Code 77063-1423  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01341**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. MICHAEL D. CUSHMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 136 HONEYBELL LANE  
 City BLAIRSVILLE State GA Zip Code 30512-0732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01342**  
 Amount of Each Receipt this Period  
 100.00

**C. DR. NEAL R. CUTLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 401 N. MAPLE DRIVE  
 City BEVERLY HILLS State CA Zip Code 90210-3818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer W.C.I., INC. Occupation C.E.O.  
 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  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01343**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 553 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RUSSELL O. CUTSHALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 135 FAIR LAWN COURT  
 City State Zip Code  
 STEPHENS CITY VA 22655-2398  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01344**  
 Amount of Each Receipt this Period  
 20.00

**B. DR. ED CUTSHAW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 309  
 City State Zip Code  
 GRAPELAND TX 75844-0309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PHYSICIAN  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 237.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01345**  
 Amount of Each Receipt this Period  
 2.00

**C. MS. KLARA B. CVITANOVICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4812 CHATEAU DRIVE  
 City State Zip Code  
 METAIRIE LA 70002-1516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01346**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	272.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 554 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. WILLIAM A. CYPERT**

Mailing Address P.O. BOX 8

City State Zip Code  
CABOT AR 72023-0008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED CONSULTANT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01347**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**B. DR. MARSHALL CYRLIN**

Mailing Address 6200 NORTHFIELD ROAD

City State Zip Code  
WEST BLOOMFIELD MI 48322-2431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01348**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. MRS. ALICE DAHL**

Mailing Address 9186 LARKSPUR GLADE

City State Zip Code  
MAPLE GROVE MN 55311-4446

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01349**

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 405.00

**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 555 OF 2949		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ALICE DAHL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9186 LARKSPUR GLADE  
 City MAPLE GROVE State MN Zip Code 55311-4446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01350**  
 Amount of Each Receipt this Period  
 35.00

**B. MRS. ALICE DAHL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9186 LARKSPUR GLADE  
 City MAPLE GROVE State MN Zip Code 55311-4446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01351**  
 Amount of Each Receipt this Period  
 50.00

**C. MS. MARILYN B. DAHL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 96 LAKE STREET  
 City OSHKOSH State WI Zip Code 54901-5441  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NOT EMPLOYED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01352**  
 Amount of Each Receipt this Period  
 505.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	590.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 556 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. GREGORY A. DAHLEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 744 CALLE DE LOS AMIGOS

City SANTA BARBARA	State CA	Zip Code 93105-4439
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2014

**Transaction ID : 2014M04L11AI01353**

Amount of Each Receipt this Period  
100.00

**B. MR. EUGENE H. DAHN**  
Full Name (Last, First, Middle Initial)

Mailing Address 9044 WILLOW STREET

City BLACK HAWK	State SD	Zip Code 57718-3204
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

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
03	/	12	/	2014

**Transaction ID : 2014M04L11AI01354**

Amount of Each Receipt this Period  
75.00

**C. MR. CLAIR W. DAINES**  
Full Name (Last, First, Middle Initial)

Mailing Address 21 BLACK BULL TRAIL

City BOZEMAN	State MT	Zip Code 59718-9660
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation BUILDER
-----------------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2014

**Transaction ID : 2014M04L11AI01355**

Amount of Each Receipt this Period  
120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	295.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 557 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. DONALD J. DAL PORTO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 78292 CALLE LAS RAMBLAS  
 City LA QUINTA State CA Zip Code 92253-8907  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01356**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. GILBERT DAMMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15929 LARCH WAY  
 City LYNNWOOD State WA Zip Code 98087-2639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI01357**  
 Amount of Each Receipt this Period  
 110.00

**C. MRS. CAROLYN J. DAMON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 791719  
 City PAIA State HI Zip Code 96779-1719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01358**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 460.00  
**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 558 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JAMES DAMON**

Mailing Address 2755 N.W. CROSSING DRIVE  
SUITE 209

City BEND State OR Zip Code 97701-7050

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01359**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MS. MICHELE I. DAMOUR**

Mailing Address 580 HALL HILL ROAD

City SOMERS State CT Zip Code 06071-1032

FEC ID number of contributing federal political committee. **C**

Name of Employer BIG Y. FOODS, INC. Occupation ADMINISTRATOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01360**

Amount of Each Receipt this Period  
110.00

Full Name (Last, First, Middle Initial)  
**C. MRS. JULIE J. DANIELS**

Mailing Address 2191 KYLE ROAD

City BARTLESVILLE State OK Zip Code 74006-6336

FEC ID number of contributing federal political committee. **C**

Name of Employer VOLUNTEER Occupation VOLUNTEER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01361**

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2860.00

**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 559 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. CARL DANN III**  
Full Name (Last, First, Middle Initial)

Mailing Address 3206 GREENS AVENUE

City ORLANDO State FL Zip Code 32804-3717

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01362**

Amount of Each Receipt this Period  
 120.00

**B. DR. CARL DANN III**  
Full Name (Last, First, Middle Initial)

Mailing Address 3206 GREENS AVENUE

City ORLANDO State FL Zip Code 32804-3717

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01363**

Amount of Each Receipt this Period  
 120.00

**C. MRS. JEAN DANNEMILLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2659 W. GULF DRIVE  
UNIT B101

City SANIBEL State FL Zip Code 33957-5944

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 302.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01364**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	340.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 560 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JEAN DANNEMILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2659 W. GULF DRIVE  
 UNIT B101  
 City SANIBEL State FL Zip Code 33957-5944  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01365**  
 Amount of Each Receipt this Period  
 101.00

**B. MRS. JEAN DANNEMILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2659 W. GULF DRIVE  
 UNIT B101  
 City SANIBEL State FL Zip Code 33957-5944  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01366**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. LEONIDAS DANSBY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3383 N. COUNTY ROAD 21  
 City OZARK State AL Zip Code 36360-3098  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01367**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	502.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 561 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DENNIS A. DARIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 356 WORTH AVENUE  
 City PALM BEACH State FL Zip Code 33480-4617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01368**  
 Amount of Each Receipt this Period 1000.00

**B. MS. KATHRYN HACH DARROW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2101 S. GARFIELD APARTMENT 424  
 City LOVELAND State CO Zip Code 80537-7378  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1070.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01369**  
 Amount of Each Receipt this Period 240.00

**C. MS. KATHRYN HACH DARROW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2101 S. GARFIELD APARTMENT 424  
 City LOVELAND State CO Zip Code 80537-7378  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1070.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01370**  
 Amount of Each Receipt this Period 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1490.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 562 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STANLEY DARSZEWSKI**  
Full Name (Last, First, Middle Initial)

Mailing Address 20 W. EDGEWOOD DRIVE

City SPRINGVILLE State NY Zip Code 14141-1417

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01371**

Amount of Each Receipt this Period  
 101.00

**B. MR. W. JOHN DAUB**  
Full Name (Last, First, Middle Initial)

Mailing Address 1705 COTTONTAIL LANE

City WICKENBURG State AZ Zip Code 85390-2186

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01372**

Amount of Each Receipt this Period  
 2000.00

**C. MR. KENNETH DAVID**  
Full Name (Last, First, Middle Initial)

Mailing Address 1064 HEDDING JACKSONVILLE RD.

City BORDENTOWN State NJ Zip Code 08505-4107

FEC ID number of contributing federal political committee. **C**

Name of Employer ATT Occupation DATA NETWORK CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01373**

Amount of Each Receipt this Period  
 215.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2316.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 563 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES P. DAVIDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2400 TRACE 24  
 City WEST LAFAYETTE State IN Zip Code 47906-1887  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01374**  
 Amount of Each Receipt this Period  
 75.00

**B. MR. JOSHUA DAVIDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3015 CASON STREET  
 City HOUSTON State TX Zip Code 77005-3812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BALU BOTTS, L.L.P. Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01375**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. MARVID D. DAVIDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4948 THRUSH AVENUE  
 City NORTHWOOD State IA Zip Code 50459-8620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01376**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 575.00  
**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 564 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEPHEN D. DAVIDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2420 STADIUM DRIVE  
 City State Zip Code  
 FORT WORTH TX 76109-1054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED SALES  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01377**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. THOMAS N. DAVIDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 SUNRISE CAY DRIVE  
 City State Zip Code  
 KEY LARGO FL 33037-5301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01378**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. HARRY J. DAVIES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2119 STATUTE LANE  
 City State Zip Code  
 VIENNA VA 22181-3265  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01379**  
 Amount of Each Receipt this Period  
 750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00  
**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 565 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARIE T. DAVIES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 355 WISETON AVE  
 City LAS VEGAS State NV Zip Code 89183-3544  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EXHIBIT FAIR INTERNATIONAL Occupation WEBMASTER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01380**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. MARK A. DAVIES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7801 KILLBARRON DRIVE  
 City LAUREL State MD Zip Code 20707-6868  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNEMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01381**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. ROBERT J. DAVIES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8321 EAGLE LAKE DRIVE  
 City SARASOTA State FL Zip Code 34241-9439  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation SMALL BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01382**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... **500.00**  
**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 566 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT W. DAVIES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13801 YORK ROAD  
 APARTMENT L-13  
 City COCKEYSVILLE State MD Zip Code 21030-1853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1001.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01383**  
 Amount of Each Receipt this Period 501.00

**B. MRS. BARBARA DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 S. FAIRVIEW RD  
 City TAFTON State PA Zip Code 18464-9759  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01384**  
 Amount of Each Receipt this Period 1000.00

**C. MR. BRUCE D. DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22530 SHANNONDELL DRIVE  
 City NORRISTOWN State PA Zip Code 19403-5663  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01385**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1751.00  
**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 567 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. C. DEAN DAVIS**

Mailing Address 3801 BALCONES DRIVE

City State Zip Code  
AUSTIN TX 78731-5807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
DAVIS & DAVIS P. C. ATTORNEY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI01386**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MRS. CYNTHIA J. DAVIS**

Mailing Address 2192 BANYAN DRIVE

City State Zip Code  
LOS ANGELES CA 90049-1802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED MARKETING CONSULTANT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01387**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. DOUGLAS DAVIS**

Mailing Address P.O. BOX 6263

City State Zip Code  
CAPE ELIZABETH ME 04107-0063

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NONE NONE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01388**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

**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 568 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JEAN L. DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7376 VICTORIA AVENUE  
 City State Zip Code  
 YUCCA VALLEY CA 92284-6043  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 262.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01389**  
 Amount of Each Receipt this Period  
 65.00

**B. MS. JEAN L. DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7376 VICTORIA AVENUE  
 City State Zip Code  
 YUCCA VALLEY CA 92284-6043  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 262.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01390**  
 Amount of Each Receipt this Period  
 67.00

**C. MR. JEFFERY L. DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 580  
 City State Zip Code  
 MALVERN AR 72104-0580  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CENTRAL TRANSPORT INC. MANAGER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01391**  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1132.00  
**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 569 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JOHN V. DAVIS**

Mailing Address 536 PARK LANE

City State Zip Code  
NASHVILLE IN 47448-8122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NURSE/OFFICE MANAGER RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01392**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. MR. JOHN V. DAVIS**

Mailing Address 536 PARK LANE

City State Zip Code  
NASHVILLE IN 47448-8122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
UNEMPLOYED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01393**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MRS. KENNETH DAVIS**

Mailing Address P.O BOX 2377

City State Zip Code  
ATHENS TX 75751-7377

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01394**

Amount of Each Receipt this Period  
220.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 320.00

**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 570 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENT R. DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 505 SKYHAWK PLACE  
 City FRANKLIN State TN Zip Code 37064-4742  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01395**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. LEE DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 839 ROCKY BROOK DRIVE APARTMENT A.  
 City AKRON State OH Zip Code 44313-8853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE UNIVERSITY OF AKRON Occupation COLLEGE INSTRUCTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01396**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. LEE DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 839 ROCKY BROOK DRIVE APARTMENT A.  
 City AKRON State OH Zip Code 44313-8853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE UNIVERSITY OF AKRON Occupation COLLEGE INSTRUCTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01397**  
 Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	560.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 571 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. LEE DAVIS**

Mailing Address 839 ROCKY BROOK DRIVE  
APARTMENT A.

City AKRON State OH Zip Code 44313-8853

FEC ID number of contributing federal political committee. **C**

Name of Employer THE UNIVERSITY OF AKRON Occupation COLLEGE INSTRUCTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01398**

Amount of Each Receipt this Period  
10.00

Full Name (Last, First, Middle Initial)  
**B. MR. LEE DAVIS**

Mailing Address 839 ROCKY BROOK DRIVE  
APARTMENT A.

City AKRON State OH Zip Code 44313-8853

FEC ID number of contributing federal political committee. **C**

Name of Employer THE UNIVERSITY OF AKRON Occupation COLLEGE INSTRUCTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01399**

Amount of Each Receipt this Period  
11.00

Full Name (Last, First, Middle Initial)  
**C. MR. LEWIS L. DAVIS**

Mailing Address 12162 DAUGHERTY DRIVE

City ZIONSVILLE State IN Zip Code 46077-8716

FEC ID number of contributing federal political committee. **C**

Name of Employer ASPHALT MATERIALS Occupation V P OF ADMIN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01400**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 141.00

**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 572 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MONTY L. DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19827 CYPRESS CHURCH ROAD  
 City CYPRESS State TX Zip Code 77433-1479  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CORE LAB L.P. Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01401**  
 Amount of Each Receipt this Period 5000.00

**B. MS. NELLA DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6321 N. TOWNSHIP ROAD 103  
 City FOSTORIA State OH Zip Code 44830-9532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01402**  
 Amount of Each Receipt this Period 120.00

**C. MS. NELLA DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6321 N. TOWNSHIP ROAD 103  
 City FOSTORIA State OH Zip Code 44830-9532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01403**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5170.00  
**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 573 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD C. DAVIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 8024 REGENT PARK LANE

City CHARLOTTE State NC Zip Code 28210-5742

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01404**

Amount of Each Receipt this Period  
 221.00

**B. MR. RICHARD R. DAVIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1185 PARK AVENUE  
APARTMENT 6G

City NEW YORK State NY Zip Code 10128-1310

FEC ID number of contributing federal political committee. **C**

Name of Employer BESSENER SECURITY CORPORATION Occupation LAWYER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01405**

Amount of Each Receipt this Period  
 500.00

**C. MR. ROBERT JAMES DAVIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1904 HALLBROOKE DRIVE

City NORMAN State OK Zip Code 73071-3910

FEC ID number of contributing federal political committee. **C**

Name of Employer SCHLUMBERGER Occupation GEOLOGIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01406**

Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 831.00

**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 574 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THEODORE ALAN DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 563 ARARAT ROAD  
 City PILOT MOUNTAIN State NC Zip Code 27041-8129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NATIONAL TISSUE COMPANY Occupation PACKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01407**  
 Amount of Each Receipt this Period  
 15.00

**B. MR. THEODORE ALAN DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 563 ARARAT ROAD  
 City PILOT MOUNTAIN State NC Zip Code 27041-8129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NATIONAL TISSUE COMPANY Occupation PACKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01408**  
 Amount of Each Receipt this Period  
 30.00

**C. MRS. DALE DAWSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8200 S. 68TH STREET  
 City FRANKLIN State WI Zip Code 53132-9271  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01409**  
 Amount of Each Receipt this Period  
 400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 445.00  
**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 575 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BARBARA DAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 707 WADDINGTON STREET  
 City BLOOMFIELD HILLS State MI Zip Code 48301-2348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01410**  
 Amount of Each Receipt this Period 501.00

**B. MRS. BETTY J. DAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 995 NUCLA STREET  
 City AURORA State CO Zip Code 80011-4342  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01411**  
 Amount of Each Receipt this Period 100.00

**C. MRS. BETTY J. DAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 995 NUCLA STREET  
 City AURORA State CO Zip Code 80011-4342  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01412**  
 Amount of Each Receipt this Period 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 611.00  
**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 576 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. REV. CHARLES DAY**

Mailing Address 134 BUMBLE CIRCLE

City MAULDIN      State SC      Zip Code 29662-2597

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01413**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. MR. DONALD W. DAY**

Mailing Address P.O. BOX 1228

City HOUSTON      State TX      Zip Code 77251-1228

FEC ID number of contributing federal political committee. **C**

Name of Employer MARATHON OIL      Occupation DRILLING ENGINEER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01414**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. DR. JOSEPH J. DAY JR.**

Mailing Address 818 8TH STREET W.

City TIFTON      State GA      Zip Code 31794-3805

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01415**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2120.00

**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 577 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JUDY DAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 1489 155TH STREET

City SIOUX CITY State IA Zip Code 51106-7295

FEC ID number of contributing federal political committee. **C**

Name of Employer MEIER TOWING Occupation BUSINESS OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01416**

Amount of Each Receipt this Period  
 250.00

**B. MRS. KATHERINE DAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 327 CASCADE ROAD

City COLUMBUS State GA Zip Code 31904-2811

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01417**

Amount of Each Receipt this Period  
 120.00

**C. MS. LUELLE B. DAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 159 W. 200 N.  
APARTMENT 109

City SALT LAKE CITY State UT Zip Code 84103-4521

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

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  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI01418**

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 670.00

**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 578 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LEE A. DAYTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 510 RIVIERA DRIVE

City NAPLES State FL Zip Code 34103-4129

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01419**

Amount of Each Receipt this Period  
 500.00

**B. MRS. ANGELA DAZZO**  
Full Name (Last, First, Middle Initial)

Mailing Address 110 POND VIEW DRIVE

City PORT WASHINGTON State NY Zip Code 11050-2454

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01420**

Amount of Each Receipt this Period  
 101.00

**C. DR. VINCENT R. DE ANGELIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 88 MEADOWFARM ROAD

City EAST ISLIP State NY Zip Code 11730-2909

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01421**

Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	711.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 579 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. GERARD DE CAMP**

Mailing Address 1127 ELDRIDGE PKWY., # 300-148

City HOUSTON	State TX	Zip Code 77077-1771
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation ENGINEER
--------------------------	------------------------

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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01422**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. DR. DANIEL J. DE LA VEGA**

Mailing Address 2255 CAMINITO PRECIOSA NORTE

City LA JOLLA	State CA	Zip Code 92037-7231
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01423**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**C. MR. WILLIAM RAYMOND DE LONG**

Mailing Address 242 ALTON MOUNTAIN ROAD

City ALTON BAY	State NH	Zip Code 03810-4314
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation FARMER
-----------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01424**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	825.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 580 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. WILLIAM RAYMOND DE LONG**

Mailing Address 242 ALTON MOUNTAIN ROAD

City ALTON BAY      State NH      Zip Code 03810-4314

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED      Occupation FARMER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01425**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. WILLIAM RAYMOND DE LONG**

Mailing Address 242 ALTON MOUNTAIN ROAD

City ALTON BAY      State NH      Zip Code 03810-4314

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED      Occupation FARMER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01426**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**C. MR. EDWARD A. DE MILLER JR.**

Mailing Address 200 DOMINICAN DRIVE  
APARTMENT 104

City MADISON      State MS      Zip Code 39110-8630

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01427**

Amount of Each Receipt this Period  
55.00

**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: PAGE 581 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD A. DE MILLER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 DOMINICAN DRIVE  
 APARTMENT 104  
 City MADISON State MS Zip Code 39110-8630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01428**  
 Amount of Each Receipt this Period 56.00

**B. DR. ALEXANDRE B. DE MOURA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 102 BRIXTON ROAD  
 City GARDEN CITY State NY Zip Code 11530-2607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation M.D.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01429**  
 Amount of Each Receipt this Period 750.00

**C. MS. FRANCENE M. DE PREZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 410 KINGSTON ROAD  
 City JEFFERSON State TX Zip Code 75657-4556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FIDELITY NATIONAL TITLE Occupation VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01430**  
 Amount of Each Receipt this Period 60.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 866.00  
**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 582 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN A. DE VALK**  
Full Name (Last, First, Middle Initial)

Mailing Address 4807 GLENCREST AVENUE

City LIVERPOOL	State NY	Zip Code 13088-4119
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : 2014M04L11AI01431**

Amount of Each Receipt this Period  
350.00

**B. MR. WAYNE DE WITT**  
Full Name (Last, First, Middle Initial)

Mailing Address 10816 S.E. EVERGREEN HIGHWAY

City VANCOUVER	State WA	Zip Code 98664-5374
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2014

**Transaction ID : 2014M04L11AI01432**

Amount of Each Receipt this Period  
500.00

**C. MR. GERRY B. DECAMP**  
Full Name (Last, First, Middle Initial)

Mailing Address 1127 ELDRIDGE PKWY., # 300-148

City HOUSTON	State TX	Zip Code 77077-1771
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation ENGINEER
-----------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2014

**Transaction ID : 2014M04L11AI01433**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 583 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALBERT DECHELLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 218 N. ADDISON AVENUE  
 City ELMHURST State IL Zip Code 60126-2721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01434**  
 Amount of Each Receipt this Period  
 90.00

**B. MR. ALBERT DECHELLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 218 N. ADDISON AVENUE  
 City ELMHURST State IL Zip Code 60126-2721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01435**  
 Amount of Each Receipt this Period  
 90.00

**C. MR. ALBERT DECHELLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 218 N. ADDISON AVENUE  
 City ELMHURST State IL Zip Code 60126-2721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01436**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 230.00  
**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 584 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALBERT DECHELLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 218 N. ADDISON AVENUE  
 City State Zip Code  
 ELMHURST IL 60126-2721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01437**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. GERALD C. DEGUISE SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16503 19TH AVENUE S.W.  
 City State Zip Code  
 BURIEEN WA 98166-2719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01438**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. PASCHAL B. DEJOHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9079 PROSPERITY WAY  
 City State Zip Code  
 FORT MYERS FL 33913-7094  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01439**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 222.00  
**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 585 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PASCHAL B. DEJOHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9079 PROSPERITY WAY  
 City State Zip Code  
 FORT MYERS FL 33913-7094  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01440**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. MIKE DEMARIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 5400  
 City State Zip Code  
 LAKE CHARLES LA 70606-5400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DEMARIE INSURANCE AGENCY INSURANCE EXECUTIVE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01441**  
 Amount of Each Receipt this Period  
 250.00

**C. MS. MARY DEMARTINIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 MANTENIDA  
 City State Zip Code  
 TRABUCO CANYON CA 92679-4151  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01442**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 586 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARCEL J. DEPERSIG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 246 RAG RUN ROAD  
 City ROANOKE State WV Zip Code 26447-8353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 341.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01443**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. MARCEL J. DEPERSIG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 246 RAG RUN ROAD  
 City ROANOKE State WV Zip Code 26447-8353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 341.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01444**  
 Amount of Each Receipt this Period  
 10.00

**C. MR. MARCEL J. DEPERSIG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 246 RAG RUN ROAD  
 City ROANOKE State WV Zip Code 26447-8353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 341.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01445**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 140.00  
**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 587 OF 2949
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARCEL J. DEPERSIG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 246 RAG RUN ROAD  
 City ROANOKE State WV Zip Code 26447-8353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 341.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01446**  
 Amount of Each Receipt this Period  
 11.00

**B. MR. MARCEL J. DEPERSIG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 246 RAG RUN ROAD  
 City ROANOKE State WV Zip Code 26447-8353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 341.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01447**  
 Amount of Each Receipt this Period  
 10.00

**C. MR. MARCEL J. DEPERSIG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 246 RAG RUN ROAD  
 City ROANOKE State WV Zip Code 26447-8353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 341.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01448**  
 Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	41.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 588 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOSEPH DERITIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 WETHERSFIELD ROAD  
 City ROCHESTER State NY Zip Code 14624-4448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01449**  
 Amount of Each Receipt this Period  
 115.00

**B. MR. JOSEPH DERITIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 WETHERSFIELD ROAD  
 City ROCHESTER State NY Zip Code 14624-4448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01450**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. LAWRENCE W. DESANTO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8122 E. CLINTON STREET  
 City SCOTTSDALE State AZ Zip Code 85260-6566  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01451**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 216.00  
**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 589 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LAWRENCE W. DESANTO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8122 E. CLINTON STREET  
 City State Zip Code  
 SCOTTSDALE AZ 85260-6566  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01452**  
 Amount of Each Receipt this Period  
 100.00

**B. DR. ERNEST J. DEWALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 847 RIVER RUN  
 City State Zip Code  
 CLARKSVILLE TN 37043-6043  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED DENTIST  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 880.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01453**  
 Amount of Each Receipt this Period  
 130.00

**C. MR. EDWARD DEWITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 254 BERKELEY WAY  
 City State Zip Code  
 DALLAS GA 30157-2139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01454**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 280.00  
**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 590 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD DEWITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 254 BERKELEY WAY  
 City DALLAS State GA Zip Code 30157-2139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI01455**  
 Amount of Each Receipt this Period  
 40.00

**B. MR. EDWARD DEWITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 254 BERKELEY WAY  
 City DALLAS State GA Zip Code 30157-2139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01456**  
 Amount of Each Receipt this Period  
 20.00

**C. MR. EDWARD DEWITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 254 BERKELEY WAY  
 City DALLAS State GA Zip Code 30157-2139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01457**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.00  
**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 591 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD DEWITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 254 BERKELEY WAY  
 City DALLAS State GA Zip Code 30157-2139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01458**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. ROBERT H. DEYOUNG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX D.  
 City EASTPORT State ME Zip Code 04631-0904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI01459**  
 Amount of Each Receipt this Period  
 440.00

**C. MR. ROBERT H. DEYOUNG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX D.  
 City EASTPORT State ME Zip Code 04631-0904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01460**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 560.00  
**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 592 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. SCOT DEABS</b>		Date of Receipt
Mailing Address 304 WATERSIDE DRIVE		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City FELTON State DE Zip Code 19943-4339		<b>Transaction ID : 2014M04L11AI01461</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer METRO AVIATION INC.	Occupation PILOT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. JAMES L. DEAGLE</b>		Date of Receipt
Mailing Address 425 DOCKSIDE DRIVE UNIT 801		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City NAPLES State FL Zip Code 34110-3658		<b>Transaction ID : 2014M04L11AI01462</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="111.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="221.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MRS. PAULINE DEAL</b>		Date of Receipt
Mailing Address 2209 SAINT JOE CENTER ROAD APARTMENT 411H		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City FORT WAYNE State IN Zip Code 46825-5084		<b>Transaction ID : 2014M04L11AI01463</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="280.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="511.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 593 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD DEAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 IMPERATRICE  
 City State Zip Code  
 DANA POINT CA 92629-4115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01464**  
 Amount of Each Receipt this Period  
 80.00

**B. MR. ROBERT M. DEAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 W. 2ND STREET  
 City State Zip Code  
 TUSTIN CA 92780-3642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SPRAY GOULD & BOWERS LAWYER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01465**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. A. JAMES DEARLOVE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1337 CHISWICK DRIVE  
 City State Zip Code  
 WEST CHESTER PA 19380-3901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PENN VIRGINIA CORPORATION C.E.O.  
 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  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01466**  
 Amount of Each Receipt this Period  
 600.00

**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: PAGE 594 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM MILTON DEARMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5736 LONGMONT LANE  
 City HOUSTON State TX Zip Code 77057-2500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01467**  
 Amount of Each Receipt this Period  
 110.00

**B. MR. WILLIAM MILTON DEARMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5736 LONGMONT LANE  
 City HOUSTON State TX Zip Code 77057-2500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01468**  
 Amount of Each Receipt this Period  
 1.00

**C. MS. MARY K. DEASON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 913 W. WALNUT STREET  
 City SYLACAUGA State AL Zip Code 35150-2835  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01469**  
 Amount of Each Receipt this Period  
 45.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 156.00  
**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 595 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LYLE E. DEBOWER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1102 NORDIC DRIVE  
UNIT 23

City DECORAH State IA Zip Code 52101-1084

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 10 / 2014  
Transaction ID : 2014M04L11AI01470

Amount of Each Receipt this Period  
100.00

**B. MR. ROBERT DECKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 13802 LOOKOUT RD STE 200

City SAN ANTONIO State TX Zip Code 78233-4528

FEC ID number of contributing federal political committee. **C**

Name of Employer INTERNATIONAL MARKETING Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
03 / 27 / 2014  
Transaction ID : 2014M04L11AI01471

Amount of Each Receipt this Period  
100.00

**C. MR. THOMAS M. DEDMONE**  
Full Name (Last, First, Middle Initial)

Mailing Address 3019 DEL PRADO

City ALAMOGORDO State NM Zip Code 88310-3961

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
03 / 17 / 2014  
Transaction ID : 2014M04L11AI01472

Amount of Each Receipt this Period  
150.00

**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: PAGE 597 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAIME P. DEJURAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2816 N PAULINA ST  
 City CHICAGO State IL Zip Code 60657-4012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DEJURS ENTERPRISES, INC Occupation BUSINESS OWNER  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01476**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. JOZEF DEKARZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 80 WEPAWAUG ROAD  
 City WOODBRIDGE State CT Zip Code 06525-2423  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DEKARZ ENGINEERING INC Occupation OWNER PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01477**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. PATRICK E. DELAMATER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 178 N. VILLAGE KNOLL CIRCLE  
 City SPRING State TX Zip Code 77381-4455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01478**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 451.00  
**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 598 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARK DELANEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 507 VANDERBILT AVENUE  
 City State Zip Code  
 VIRGINIA BEACH VA 23451-3669  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 COASTAL FINANCE C.E.O.  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01479**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. RICHARD DELANEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 331 MAYFLOWER CIRCLE  
 City State Zip Code  
 HANOVER MA 02339-2124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01480**  
 Amount of Each Receipt this Period  
 450.00

**C. MR. FRANK DELFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 538 DALE DRIVE  
 City State Zip Code  
 INCLINE VILLAGE NV 89451-8312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 D.S.T. OUTPUT BUSINESS EXECUTIVE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01481**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00  
**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 599 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CORINNE DELLAERA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 MARGEMERE DRIVE  
 City State Zip Code  
 FAIRFIELD CT 06824-7315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 VOLUNTEER REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01482**  
 Amount of Each Receipt this Period  
 85.00

**B. MRS. CORINNE DELLAERA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 MARGEMERE DRIVE  
 City State Zip Code  
 FAIRFIELD CT 06824-7315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 VOLUNTEER REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01483**  
 Amount of Each Receipt this Period  
 35.00

**C. MRS. CORINNE DELLAERA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 MARGEMERE DRIVE  
 City State Zip Code  
 FAIRFIELD CT 06824-7315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01484**  
 Amount of Each Receipt this Period  
 85.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	205.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 600 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DEBRA S. DELMAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2052 STEPHANIE MARIE DRIVE  
 City State Zip Code  
 FALLS CHURCH VA 22043-1546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 VANGUARD REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01485**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. JACK C. DEMETREE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6671 EPPING FOREST WAY N  
 City State Zip Code  
 JACKSONVILLE FL 32217-2696  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DEMETREE BROTHERS INC. EXECUTIVE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 16200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01486**  
 Amount of Each Receipt this Period  
 16200.00

**C. MR. VERDON C. DEMILLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1617  
 City State Zip Code  
 ROOSEVELT UT 84066-1617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01487**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 16570.00  
**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 601 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT H. DEMPSEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1461 LANDINGS CIRCLE  
 City SARASOTA State FL Zip Code 34231-3228  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01488**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. ROBERT H. DEMPSEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1461 LANDINGS CIRCLE  
 City SARASOTA State FL Zip Code 34231-3228  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01489**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. ROBERT DENBLEYKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6508 BRANDYWINE ROAD  
 City RALEIGH State NC Zip Code 27607-4819  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01490**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 151.00  
**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 602 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT N. DENHAM JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8239 DRESSAGE WAY  
 City SACRAMENTO State CA Zip Code 95829-6513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01491**  
 Amount of Each Receipt this Period  
 120.00

**B. MS. MARGIE D. DENISON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4354 HERMOSA WAY  
 City SALT LAKE CITY State UT Zip Code 84124-3762  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01492**  
 Amount of Each Receipt this Period  
 75.00

**C. MS. MARGIE D. DENISON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4354 HERMOSA WAY  
 City SALT LAKE CITY State UT Zip Code 84124-3762  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01493**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 245.00  
**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 603 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ANTHONY J. DENNIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 105 BENTWOOD COURT  
 City State Zip Code  
 BLUE ASH OH 45241-3275  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BIO OHIO PRESIDENT & C.E.O.  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01494**  
 Amount of Each Receipt this Period  
 50.00

**B. MS. GRACE A. DENNIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1800 MAYNORD CIRCLE  
 City State Zip Code  
 OKLAHOMA CITY OK 73110-5036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01495**  
 Amount of Each Receipt this Period  
 35.00

**C. MS. GRACE A. DENNIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1800 MAYNORD CIRCLE  
 City State Zip Code  
 OKLAHOMA CITY OK 73110-5036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01496**  
 Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 120.00  
**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 604 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. GRACE A. DENNIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1800 MAYNORD CIRCLE

City OKLAHOMA CITY	State OK	Zip Code 73110-5036
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI01497**

Amount of Each Receipt this Period  
35.00

**B. MR. RODNEY E. DENNIS**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 21199

City SAINT SIMONS ISLAND	State GA	Zip Code 31522-0699
-----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation ARBITRATOR
-----------------------------------	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2014

**Transaction ID : 2014M04L11AI01498**

Amount of Each Receipt this Period  
100.00

**C. MR. MARK JAMES DENTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2304 MEDFORD COURT W.

City FORT WORTH	State TX	Zip Code 76109-1137
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer J. P. MORGAN CLARE	Occupation BANKER
--	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2014

**Transaction ID : 2014M04L11AI01499**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	385.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 605 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. N. EDWARD DENTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1709 LANTANA DRIVE  
 City MINDEN State NV Zip Code 89423-5103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01500**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. PEDRO DENTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5000 NOTTINGHAM WAY  
 City ANCHORAGE State AK Zip Code 99503-6936  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01501**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. ROBERT J. DEPUTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22628 WEATHERBY LANE  
 City ELKHART State IN Zip Code 46514-4632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01502**  
 Amount of Each Receipt this Period  
 310.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	411.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 606 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JAMES J. DERBA**

Mailing Address 1010 WALTHAM STREET  
APARTMENT 357

City LEXINGTON State MA Zip Code 02421-8064

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01503**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. MR. GERALD DESJARLAIS**

Mailing Address 10917 E. SPRING CREEK ROAD

City SUN LAKES State AZ Zip Code 85248-7941

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01504**

Amount of Each Receipt this Period  
240.00

Full Name (Last, First, Middle Initial)  
**C. JOSEPH MICHAEL DESARLA**

Mailing Address 14535 GEIST RIDGE DRIVE

City FISHERS State IN Zip Code 46040-9021

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01505**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1240.00

**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

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(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. LAINE DESOUZA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 156  
 City WINCOTA State PA Zip Code 19095-0156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01506**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. RAYMOND R. DESTIEGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 981 BROOKWOOD LANE E.  
 City ROCHESTER HILLS State MI Zip Code 48309-1547  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01507**  
 Amount of Each Receipt this Period  
 140.00

**C. MR. RAYMOND R. DESTIEGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 981 BROOKWOOD LANE E.  
 City ROCHESTER HILLS State MI Zip Code 48309-1547  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01508**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 740.00  
**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

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(check only one)  
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 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN E. DETTRA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7906 FOXHOUND ROAD  
 City State Zip Code  
 MC LEAN VA 22102-2403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01509**  
 Amount of Each Receipt this Period  
 110.00

**B. MR. RICHARD A. DEUTSCHMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15699 AZURITE DRIVE.  
 City State Zip Code  
 CHINO HILLS CA 91709-2122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01510**  
 Amount of Each Receipt this Period  
 375.00

**C. MR. TIM DEVANNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 70 PORTER STREET  
 City State Zip Code  
 MANCHESTER CT 06040-5438  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HIGHLAND PARK MARKET RETAIL GROCER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01511**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 585.00  
**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 609 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TIM DEVANNEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 70 PORTER STREET

City State Zip Code  
MANCHESTER CT 06040-5438

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HIGHLAND PARK MARKET RETAIL GROCER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01512**

Amount of Each Receipt this Period  
100.00

**B. MR. TIM DEVANNEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 70 PORTER STREET

City State Zip Code  
MANCHESTER CT 06040-5438

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HIGHLAND PARK MARKET RETAIL GROCER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01513**

Amount of Each Receipt this Period  
250.00

**C. MR. ROBERT J. DEVEREAUX**  
Full Name (Last, First, Middle Initial)

Mailing Address 5501 DEWEY HILL ROAD  
APARTMENT 233

City State Zip Code  
MINNEAPOLIS MN 55439-1912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01514**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00

**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

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. R. BRUCE DEWEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16 PINERIDGE DRIVE  
 City WESTFIELD State MA Zip Code 01085-4524  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MESTEK, INC. Occupation BUSINESS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01515**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. ROBERT M. DEWEY JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 211 W. MOUNTAIN ROAD  
 City RIDGEFIELD State CT Zip Code 06877-3627  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01516**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. CARLETON D. DEYAMPERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 317 COLUMBIA AVENUE  
 City JERSEY CITY State NJ Zip Code 07307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01517**  
 Amount of Each Receipt this Period  
 210.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 810.00  
**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

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LEONARD M. DI GRANDE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19984 RIVERWOODS COURT  
 City State Zip Code  
 MACOMB MI 48044-5762  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PRESIDENT/CEO  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01518**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. LAWRENCE DIGIACOMO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2379 OCEAN AVENUE  
 City State Zip Code  
 SAN FRANCISCO CA 94127-2605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED INSURANCE BROKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01519**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. PATRICIA DICKERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 182 W. KATHLEEN DRIVE  
 City State Zip Code  
 PARK RIDGE IL 60068-2618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01520**  
 Amount of Each Receipt this Period  
 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 805.00  
**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 612 OF 2949  
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES C. DICKERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 54 HUNTINGTON COURT  
 City State Zip Code  
 BURR RIDGE IL 60527-6451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PACKAGING & CONSULTING SALES  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01521**  
 Amount of Each Receipt this Period  
 375.00

**B. MR. DANIEL M. DICKINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 340 MAPLE ROW  
 City State Zip Code  
 NORTHFIELD IL 60093-1036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 H.C.I. EQUITY PARTNERS INVESTMENT MANAGER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01522**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. RICHARD A. DICKINSON JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 480 MAPLE CITY DRIVE  
 APARTMENT G3  
 City State Zip Code  
 HORNELL NY 14843-2278  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DISABLED DISABLED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01523**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ► 1495.00  
**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 613 OF 2949  
(check only one)  
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD A. DICKINSON JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 480 MAPLE CITY DRIVE  
 APARTMENT G3  
 City HORNELL State NY Zip Code 14843-2278  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01524**  
 Amount of Each Receipt this Period 31.00

**B. MR. MICHAEL L. DICKMEYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3820 YOUNG STREET  
 City OMAHA State NE Zip Code 68112-2045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer METROPOLITAN COMMUNITY COLLEGE Occupation COLLEGE ENGLISH TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01525**  
 Amount of Each Receipt this Period 101.00

**C. MR. EDWIN D. DICKSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 863  
 City NUNDA State NY Zip Code 14517-0863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 661.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01526**  
 Amount of Each Receipt this Period 51.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 183.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWIN D. DICKSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 863  
 City NUNDA State NY Zip Code 14517-0863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 661.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01527**  
 Amount of Each Receipt this Period  
 550.00

**B. MS. CAROL ANN DIEHL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2401 PENNSYLVANIA AVENUE APARTMENT 1105  
 City WILMINGTON State DE Zip Code 19806-1417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01528**  
 Amount of Each Receipt this Period  
 230.00

**C. MS. ANTOINETTE P. DIEMER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10919 MAIDEN DRIVE  
 City BOWIE State MD Zip Code 20720-3599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 851.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01529**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	890.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)  
 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ANTOINETTE P. DIEMER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10919 MAIDEN DRIVE  
 City BOWIE State MD Zip Code 20720-3599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 851.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01530**  
 Amount of Each Receipt this Period 100.00

**B. MS. ANTOINETTE P. DIEMER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10919 MAIDEN DRIVE  
 City BOWIE State MD Zip Code 20720-3599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 851.00

Date of Receipt 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01531**  
 Amount of Each Receipt this Period 111.00

**C. MS. ANTOINETTE P. DIEMER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10919 MAIDEN DRIVE  
 City BOWIE State MD Zip Code 20720-3599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 851.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01532**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 311.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. AUDREY C. DIERKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 809 NELSON ROAD  
 City ERLANGER State KY Zip Code 41018-2810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01533**  
 Amount of Each Receipt this Period  
 51.00

**B. MRS. AUDREY C. DIERKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 809 NELSON ROAD  
 City ERLANGER State KY Zip Code 41018-2810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01534**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. ROBERT JOSEPH DIERSING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7706 NOCONA CIRCLE  
 City CORPUS CHRISTI State TX Zip Code 78413-6118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TEXAS A&M UNIVERSITY Occupation COLLEGE PROFESSOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01535**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 617 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS W. DIETRICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 460 MEDICK WAY  
 City WORTHINGTON State OH Zip Code 43085-3086  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01536**  
 Amount of Each Receipt this Period 500.00

**B. MR. VICTOR F. DIFFEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1681 E. I40  
 City EL RENO State OK Zip Code 73036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CAR DEALER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01537**  
 Amount of Each Receipt this Period 275.00

**C. MRS. DARLENE L. DILLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 139 AMMANN ROAD  
 City BOERNE State TX Zip Code 78015-4671  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DILLEY ALLERGY & ASHTMA SPECIALISTS Occupation ADMINISTRATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01538**  
 Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1075.00  
**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 618 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM B. DILLINGHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 269  
 City State Zip Code  
 ELLERSLIE GA 31807-0269  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01539**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. RAY C. DILLON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 57 SOLOGNE CIRCLE  
 City State Zip Code  
 LITTLE ROCK AR 72223-8913  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DELTIC TIMBER CORPORATION PRESIDENT & C.E.O.  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01540**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. HAROLD DILLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 14709  
 City State Zip Code  
 OKLAHOMA CITY OK 73113-0709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MIDWEST FABRICATORS MANAGER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01541**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 901.00  
**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 619 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. ROBERT J. DINEEN</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 28 / 2014 <b>Transaction ID : 2014M04L11AI01542</b>
Mailing Address 2525 CAMPDEN LANE		Amount of Each Receipt this Period 1001.00
City NORTHBROOK	State IL	Zip Code 60062-8108
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2001.00	

Full Name (Last, First, Middle Initial) <b>B. MR. WILLIAM G. DINSMORE</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2014 <b>Transaction ID : 2014M04L11AI01543</b>
Mailing Address 4355 DAHLONEGA HIGHWAY		Amount of Each Receipt this Period 250.00
City CUMMING	State GA	Zip Code 30028-5943
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. MR. ERIC COLBURN DISBROW</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 21 / 2014 <b>Transaction ID : 2014M04L11AI01544</b>
Mailing Address 3640 FAIRWAY DRIVE		Amount of Each Receipt this Period 50.00
City CAMERON PARK	State CA	Zip Code 95682-8626
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer ERIC C DISBROW	Occupation PHSYCIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1301.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 620 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD J. DITTBERNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8405 PITTSFIELD COURT  
 City POTOMAC State MD Zip Code 20854-4051  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01545**  
 Amount of Each Receipt this Period  
 105.00

**B. MR. DONALD J. DITTBERNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8405 PITTSFIELD COURT  
 City POTOMAC State MD Zip Code 20854-4051  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01546**  
 Amount of Each Receipt this Period  
 120.00

**C. MRS. MARION L. DIVOLA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18622 AMATE CIRCLE  
 City VILLA PARK State CA Zip Code 92861-4217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01547**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	525.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 621 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. CHARLES M. DIXON**

Mailing Address **882 BLOOMER SPRINGS ROAD**

City **MC GAHEYSVILLE**      State **VA**      Zip Code **22840-2333**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **REQUESTED**      Occupation **REQUESTED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**325.00**

Date of Receipt  
**03 / 03 / 2014**  
**Transaction ID : 2014M04L11AI01548**

Amount of Each Receipt this Period  
**200.00**

Full Name (Last, First, Middle Initial)  
**B. MR. ERIC A. DIXON**

Mailing Address **2915 BLOOMFIELD XING**

City **BLOOMFIELD HILLS**      State **MI**      Zip Code **48304-1716**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **WASTE MANAGEMENT**      Occupation **VICE PRESIDENT**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**225.00**

Date of Receipt  
**03 / 14 / 2014**  
**Transaction ID : 2014M04L11AI01549**

Amount of Each Receipt this Period  
**225.00**

Full Name (Last, First, Middle Initial)  
**C. MR. ERIC L. DIXON**

Mailing Address **1824 S. 9TH AVENUE**

City **MAYWOOD**      State **IL**      Zip Code **60153-3242**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **REQUESTED**      Occupation **REQUESTED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI01550**

Amount of Each Receipt this Period  
**35.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **460.00**

**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 622 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ERIC L. DIXON**

Mailing Address 1824 S. 9TH AVENUE

City MAYWOOD State IL Zip Code 60153-3242

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01551**

Amount of Each Receipt this Period  
 30.00

Full Name (Last, First, Middle Initial)  
**B. MR. ERIC L. DIXON**

Mailing Address 1824 S. 9TH AVENUE

City MAYWOOD State IL Zip Code 60153-3242

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01552**

Amount of Each Receipt this Period  
 30.00

Full Name (Last, First, Middle Initial)  
**C. MR. ERIC L. DIXON**

Mailing Address 1824 S. 9TH AVENUE

City MAYWOOD State IL Zip Code 60153-3242

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01553**

Amount of Each Receipt this Period  
 35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 623 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS H. DIXON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4677 MIRABELLA COURT  
 City ST. PETE BEACH State FL Zip Code 33706-2580  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 661.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01554**  
 Amount of Each Receipt this Period  
 220.00

**B. MR. THOMAS H. DIXON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4677 MIRABELLA COURT  
 City ST. PETE BEACH State FL Zip Code 33706-2580  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 661.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01555**  
 Amount of Each Receipt this Period  
 220.00

**C. MR. THOMAS H. DIXON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4677 MIRABELLA COURT  
 City ST. PETE BEACH State FL Zip Code 33706-2580  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 661.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01556**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 441.00  
**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 624 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD S. DODD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1390 GULFSTAR DRIVE S.  
 City State Zip Code  
 NAPLES FL 34112-6402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01557**  
 Amount of Each Receipt this Period  
 400.00

**B. MR. RICHARD S. DODD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1390 GULFSTAR DRIVE S.  
 City State Zip Code  
 NAPLES FL 34112-6402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01558**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. DONALD C. DODDS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 308 S. NEIL STREET  
 City State Zip Code  
 CHAMPAIGN IL 61820-4914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01559**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 451.00  
**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 625 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARIE DOLDOORIAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 186  
 City STURBRIDGE State MA Zip Code 01566-0186  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01560**  
 Amount of Each Receipt this Period  
**250.00**

**B. MR. JOE EDWARD DOLIVE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7017 TAMERON TRAIL  
 City FORT WORTH State TX Zip Code 76132-3505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **230.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01561**  
 Amount of Each Receipt this Period  
**100.00**

**C. MRS. GLORIA DOLLINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 604 TIMBERLINE DRIVE  
 City JOLIET State IL Zip Code 60431-4833  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JOLIET PARK DISTRICT Occupation DIETITIAN  
 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  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01562**  
 Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>450.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 626 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. VIOLET D. DOLLINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14097 MAYS ROAD  
 City State Zip Code  
 GULFPORT MS 39503-2591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01563**  
 Amount of Each Receipt this Period  
 50.00

**B. MRS. VIOLET D. DOLLINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14097 MAYS ROAD  
 City State Zip Code  
 GULFPORT MS 39503-2591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01564**  
 Amount of Each Receipt this Period  
 50.00

**C. COL. HARRY J. DOLTON JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5902 MOUNT EAGLE DRIVE  
 APARTMENT 904  
 City State Zip Code  
 ALEXANDRIA VA 22303-2518  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01565**  
 Amount of Each Receipt this Period  
 385.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 485.00  
**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 627 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. JANE M. DOMMERICH</b>		Date of Receipt
Mailing Address 28 MIDDLE ROAD		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
PALM BEACH	FL	33480-4712
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI01566</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="101.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="236.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MRS. MAURA K. DONLEY</b>		Date of Receipt
Mailing Address 1001 LIBERTY AVENUE SUITE 850		<input type="text" value="03"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
PITTSBURGH	PA	15222-3718
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI01567</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
STUDENT	STUDENT	<input type="text" value="2738.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2738.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. RICHARD DONNER</b>		Date of Receipt
Mailing Address 3223 SANTA BARBARA BLVD.		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
CAPE CORAL	FL	33914-5057
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI01568</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="3339.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 628 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MATTHEW DONOHOE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 90 EAST END AVENUE  
 4A  
 City NEW YORK State NY Zip Code 10028-8000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: HOMEMAKER Occupation: HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01569**  
 Amount of Each Receipt this Period: 1000.00

**B. MR. MICHAEL O. DONOHOO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21607 GLEN PEAK COVE  
 City DIAMOND BAR State CA Zip Code 91765-3825  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: RETIRED Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt: 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01570**  
 Amount of Each Receipt this Period: 51.00

**C. MRS. MARY DONOHUE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2291 N. CHAMBLISS STREET  
 City ALEXANDRIA State VA Zip Code 22311-1603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: RETIRED Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01571**  
 Amount of Each Receipt this Period: 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1152.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 629 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. DAVID A. DOOLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 WORTH AVENUE  
 APARTMENT 511  
 City PALM BEACH State FL Zip Code 33480-6704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MJW CORPORATION Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01572**  
 Amount of Each Receipt this Period  
 150.00

**B. DR. DAVID A. DOOLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 WORTH AVENUE  
 APARTMENT 511  
 City PALM BEACH State FL Zip Code 33480-6704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MJW CORPORATION Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01573**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. WILLIAM K. DOPPSTADT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3501 N. HICKORY DRIVE  
 City JANESVILLE State WI Zip Code 53545-9024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01574**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 470.00  
**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 630 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM K. DOPPSTADT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3501 N. HICKORY DRIVE  
 City JANESVILLE State WI Zip Code 53545-9024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01575**  
 Amount of Each Receipt this Period 1.00

**B. MS. CINDY DORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1017 NANTUCKET APARTMENT D.  
 City HOUSTON State TX Zip Code 77057-1957  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01576**  
 Amount of Each Receipt this Period 250.00

**C. MRS. PHYLLIS DORRICATION**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26710 BIRCH HILL WAY  
 City LOS ALTOS HILLS State CA Zip Code 94022-3302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01577**  
 Amount of Each Receipt this Period 315.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 566.00  
**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 631 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HAROLD D. DORSEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1010 L. STREET  
 City LOUP CITY State NE Zip Code 68853-5160  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01578**  
 Amount of Each Receipt this Period  
 51.00

**B. MR. HAROLD D. DORSEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1010 L. STREET  
 City LOUP CITY State NE Zip Code 68853-5160  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01579**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. HARRY DORVILIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8825 163RD STREET  
 City JAMAICA State NY Zip Code 11432-4046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01580**  
 Amount of Each Receipt this Period  
 2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2601.00  
**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 632 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. BETTY DOSS**

Mailing Address P.O. BOX 1575

City State Zip Code  
COTTONWOOD CA 96022-1575

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01581**

Amount of Each Receipt this Period  
35.00

Full Name (Last, First, Middle Initial)  
**B. MRS. BETTY DOSS**

Mailing Address P.O. BOX 1575

City State Zip Code  
COTTONWOOD CA 96022-1575

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01582**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MR. EMERY DOUGHERTY**

Mailing Address 451 HUNTING PARK LANE

City State Zip Code  
YORK PA 17402-3617

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01583**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 185.00

**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 633 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JAN M. DOUGHTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 708 NASSAU ROAD  
 City COCOA BEACH State FL Zip Code 32931-3046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01584**  
 Amount of Each Receipt this Period 110.00

**B. MR. LARRY B. DOUGLAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 52 BUCCANEER DRIVE  
 City HATTIESBURG State MS Zip Code 39402-9543  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INLAND PAPERBOARD & PACKAGING Occupation ACCOUNT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01585**  
 Amount of Each Receipt this Period 106.00

**C. MR. RONALD M. DOUMANI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32 QUIET MOON LANE  
 City LAS VEGAS State NV Zip Code 89135-7863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01586**  
 Amount of Each Receipt this Period 202.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	418.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 634 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PIOTR R. DOWBYSZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 GREENMEADOW LANE  
 City WHITING State NJ Zip Code 08759-2353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01587**  
 Amount of Each Receipt this Period  
 110.00

**B. MR. PIOTR R. DOWBYSZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 GREENMEADOW LANE  
 City WHITING State NJ Zip Code 08759-2353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01588**  
 Amount of Each Receipt this Period  
 51.00

**C. MR. KENNETH DOWNARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3309 E HERITAGE COVE DR  
 City SAINT AUGUSTINE State FL Zip Code 32092-3639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01589**  
 Amount of Each Receipt this Period  
 750.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	911.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 635 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. AUGUSTA DOWNEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 111 POINT LOOKOUT

City MILFORD State CT Zip Code 06460-7300

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01590**

Amount of Each Receipt this Period  
300.00

**B. MR. JAMES S. DOWNING**  
Full Name (Last, First, Middle Initial)

Mailing Address 4571 DAWNGATE LANE

City ROLLING MEADOWS State IL Zip Code 60008-2204

FEC ID number of contributing federal political committee. **C**

Name of Employer BRIDGESTONE RETAIL OPERATIONS LLC Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01591**

Amount of Each Receipt this Period  
200.00

**C. MS. ELESHA JANE DOWNS**  
Full Name (Last, First, Middle Initial)

Mailing Address 526 S. BOEKE ROAD

City EVANSVILLE State IN Zip Code 47714-1610

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01592**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 620.00

**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 636 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ELESJA JANE DOWNS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 526 S. BOEKE ROAD  
 City EVANSVILLE State IN Zip Code 47714-1610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **345.00**

Date of Receipt: **03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI01593**  
 Amount of Each Receipt this Period: **50.00**

**B. MR. SIMON M. DOWNS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 909 HUNTSFORD TERRACE  
 City THOMASVILLE State NC Zip Code 27360-2505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt: **03 / 05 / 2014**  
**Transaction ID : 2014M04L11AI01594**  
 Amount of Each Receipt this Period: **200.00**

**C. MR. SIMON M. DOWNS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 909 HUNTSFORD TERRACE  
 City THOMASVILLE State NC Zip Code 27360-2505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt: **03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI01595**  
 Amount of Each Receipt this Period: **50.00**

**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 637 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. GEORGIA A. DOYLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 121 BITTERNUT ROAD  
 City State Zip Code  
 AMELIA ISLAND FL 32034-5000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PHYSICIAN  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01596**  
 Amount of Each Receipt this Period  
 225.00

**B. MS. CHARYL LYNN DRAB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 690087  
 City State Zip Code  
 HOUSTON TX 77269-0087  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED OWNER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 355.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01597**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. CHARYL LYNN DRAB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 690087  
 City State Zip Code  
 HOUSTON TX 77269-0087  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED OWNER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 355.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01598**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	445.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 638 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CHARYL LYNN DRAB**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 690087

City HOUSTON	State TX	Zip Code 77269-0087
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

Date of Receipt  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01599**

Amount of Each Receipt this Period  
350.00

**B. MS. CHARYL LYNN DRAB**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 690087

City HOUSTON	State TX	Zip Code 77269-0087
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

Date of Receipt  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01600**

Amount of Each Receipt this Period  
100.00

**C. MRS. MARJORIE W. DRACKETT**  
Full Name (Last, First, Middle Initial)  
Mailing Address 100 GLENVIEW PLACE

City NAPLES	State FL	Zip Code 34108-3137
FEC ID number of contributing federal political committee. C		
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00	

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01601**

Amount of Each Receipt this Period  
501.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	636.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 639 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. JEANNE E. DRAKE</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI01602</b>
Mailing Address 8707 TALBOT ROAD		Amount of Each Receipt this Period 106.00
City EDMONDS	State WA	Zip Code 98026-5049
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.00	

Full Name (Last, First, Middle Initial) <b>B. MR. HENRY DRAPELA</b>		Date of Receipt 03 / 12 / 2014 <b>Transaction ID : 2014M04L11AI01603</b>
Mailing Address 2101 N. SHEPHERD DRIVE		Amount of Each Receipt this Period 500.00
City HOUSTON	State TX	Zip Code 77008-3647
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. MS. PATRICIA W. DRASNER</b>		Date of Receipt 03 / 04 / 2014 <b>Transaction ID : 2014M04L11AI01604</b>
Mailing Address 156 GULFSTREAM DRIVE		Amount of Each Receipt this Period 200.00
City TEQUESTA	State FL	Zip Code 33469-2085
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	806.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 640 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. PATRICIA W. DRASNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 156 GULFSTREAM DRIVE  
 City State Zip Code  
 TEQUESTA FL 33469-2085  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01605**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. THOMAS COLEMAN DRESBACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12215 VIEWCREST ROAD  
 City State Zip Code  
 STUDIO CITY CA 91604-3650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01606**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. THOMAS COLEMAN DRESBACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12215 VIEWCREST ROAD  
 City State Zip Code  
 STUDIO CITY CA 91604-3650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01607**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 201.00  
**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 641 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ED DRESSMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1400 RIVERSIDE DRIVE  
 City CINCINNATI State OH Zip Code 45202-1754  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FIFTH THIRD BANK Occupation I.T. MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01608**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. WILLIAM C. DREW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 215 RUNNING BROOK LANE  
 City MESQUITE State TX Zip Code 75149-5909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01609**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. VAUGHAN DRINKARD JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1070 GOVERNMENT STREET  
 City MOBILE State AL Zip Code 36604-2442  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01610**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 351.00  
**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 642 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. VAUGHAN DRINKARD JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1070 GOVERNMENT STREET  
 City MOBILE State AL Zip Code 36604-2442  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01611**  
 Amount of Each Receipt this Period 110.00

**B. MS. LEANNE E. DRISCOLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11457 E. JUAN TABO ROAD  
 City SCOTTSDALE State AZ Zip Code 85255-5707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FITNESS TRAINER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01612**  
 Amount of Each Receipt this Period 750.00

**C. MRS. JANE DRISKELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 337  
 City KINGMONT State WV Zip Code 26578-0337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01613**  
 Amount of Each Receipt this Period 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	960.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 643 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JANE DRISKELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 337  
 City KINGMONT State WV Zip Code 26578-0337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01614**  
 Amount of Each Receipt this Period  
 101.00

**B. MS. DONNA G. DROCHAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 789 SPRUCE CREEK ROAD  
 City JAMESTOWN State TN Zip Code 38556-6816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01615**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. ALEX DROZDIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3201 COULTERVILLE ROAD  
 City WHITE OAK State PA Zip Code 15131-3211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01616**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	421.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 644 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALEX DROZDIAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3201 COULTERVILLE ROAD  
 City State Zip Code  
 WHITE OAK PA 15131-3211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01617**  
 Amount of Each Receipt this Period  
 26.00

**B. MR. KENT G. DUPONT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5500 BLOOD ROAD  
 City State Zip Code  
 METAMORA MI 48455-9338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01618**  
 Amount of Each Receipt this Period  
 95.00

**C. MR. WILLIAM B. DUANE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 121 LOWELL ROAD  
 City State Zip Code  
 WELLESLEY HILLS MA 02481-2717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01619**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 171.00  
**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 645 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LAWRENCE DUCKWORTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 833 LAKEGLEN DRIVE  
 City SUWANEE State GA Zip Code 30024-3465  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI01620**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. TONY G. DUCKWORTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 526 W. OGLETHORPE BLVD.  
 City ALBANY State GA Zip Code 31701-2838  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01621**  
 Amount of Each Receipt this Period  
 101.00

**C. MRS. RUTHIE DUENNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3817 E. 111TH STREET  
 City TULSA State OK Zip Code 74137-7404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01622**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 601.00  
**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 646 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ARLEN DUESENBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8 CERREDO LANE  
 City HOT SPRINGS State AR Zip Code 71909-4308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01623**  
 Amount of Each Receipt this Period  
 140.00

**B. MR. ARLEN DUESENBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8 CERREDO LANE  
 City HOT SPRINGS State AR Zip Code 71909-4308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01624**  
 Amount of Each Receipt this Period  
 140.00

**C. MR. ROBERT DUFEK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11833 HUNTING RIDGE CT  
 City POTOMAC State MD Zip Code 20854-2152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REFUSED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01625**  
 Amount of Each Receipt this Period  
 515.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 795.00  
**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 647 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DANIEL DUFFY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10312 SCOTT MILL ROAD  
 City JACKSONVILLE State FL Zip Code 32257-6251  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PHYSICIAN Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01626**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. JAMES DUFFY JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 193 LONGVUE DRIVE  
 City PITTSBURGH State PA Zip Code 15237-2260  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SHERWIN - WILLIAMS PAINT COMPANY Occupation TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01627**  
 Amount of Each Receipt this Period  
 210.00

**C. MR. TOM A. DUGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 234  
 City FARMINGTON State NM Zip Code 87499-0234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PETROLEUM ENGINEER  
 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  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01628**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	430.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 648 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TOM A. DUGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 234  
 City FARMINGTON State NM Zip Code 87499-0234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PETROLEUM ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01629**  
 Amount of Each Receipt this Period 200.00

**B. MR. LEO F. DUGGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10509 ACACIA LANE  
 City FAIRFAX State VA Zip Code 22032-3704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01630**  
 Amount of Each Receipt this Period 100.00

**C. MR. LEO F. DUGGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10509 ACACIA LANE  
 City FAIRFAX State VA Zip Code 22032-3704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01631**  
 Amount of Each Receipt this Period 50.00

**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 649 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TIMOTHY P. DUGGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 40 WINDING WAY  
 City State Zip Code  
 SHORT HILLS NJ 07078-2530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CITIGROUP ACCOUNTANT  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI01632**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. MURRAY DUGGINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1107 OFFSHORE DRIVE  
 City State Zip Code  
 FAYETTEVILLE NC 28305-5250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED REAL ESTATE DEVELOPER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01633**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. RICHARD K. DUKES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 BILLINGHAM LANE  
 City State Zip Code  
 KALAMAZOO MI 49009-2402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 A.M. TODD SALES DIRECTOR  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 305.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01634**  
 Amount of Each Receipt this Period  
 305.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	675.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 650 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARTIN P. DUMLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3370 S. LOCUST STREET

City DENVER State CO Zip Code 80222-7665

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01635**

Amount of Each Receipt this Period  
200.00

**B. MRS. EILEEN MICHEAL DUMOLT**  
Full Name (Last, First, Middle Initial)

Mailing Address 37017 SE 13TH STREET

City WASHOUGAL State WA Zip Code 98671-8761

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01636**

Amount of Each Receipt this Period  
1000.00

**C. DR. R. C. DUNAVANT D.V.M.**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 418

City KENBRIDGE State VA Zip Code 23944-0418

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation VETERINARIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01637**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1300.00

**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 651 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. R. C. DUNAVANT D.V.M.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 418  
 City KENBRIDGE State VA Zip Code 23944-0418  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation VETERINARIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01638**  
 Amount of Each Receipt this Period  
 120.00

**B. DR. R. C. DUNAVANT D.V.M.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 418  
 City KENBRIDGE State VA Zip Code 23944-0418  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation VETERINARIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01639**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. BRUCE C. DUNBAR JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 10265  
 City BIRMINGHAM State AL Zip Code 35202-0265  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MCGRIFF, SEIBELS, WILLIAMS Occupation CHAIRMAN/C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI01640**  
 Amount of Each Receipt this Period  
 25000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 25121.00  
**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 652 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CRAIG EDWIN DUNCAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 4453 LOS SERRANOS BLVD.

City CHINO HILLS	State CA	Zip Code 91709-3022
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2014

**Transaction ID : 2014M04L11AI01641**

Amount of Each Receipt this Period  
500.00

**B. CAPT. MAX C. DUNCAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 95 SKIDAWAY ISLAND PARK ROAD  
UNIT 209

City SAVANNAH	State GA	Zip Code 31411-1109
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : 2014M04L11AI01642**

Amount of Each Receipt this Period  
110.00

**C. MR. RAYMOND E. DUNCAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 325 FOREST VIEW DRIVE

City BEDFORD	State IN	Zip Code 47421-5216
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2014

**Transaction ID : 2014M04L11AI01643**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	660.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 653 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. RAYMOND E. DUNCAN**

Mailing Address 325 FOREST VIEW DRIVE

City Bedford State IN Zip Code 47421-5216

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01644**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. MR. RAYMOND E. DUNCAN**

Mailing Address 325 FOREST VIEW DRIVE

City Bedford State IN Zip Code 47421-5216

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01645**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MR. DONALD DUNCKLEE**

Mailing Address 6267 SHADOW TREE LANE

City LAKE WORTH State FL Zip Code 33463-8241

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01646**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

**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 654 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. ALEXA DUNETZ</b>		Date of Receipt
Mailing Address 28 CAMPBELL DRIVE		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
DIX HILLS	NY	11746-7902
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI01647
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="281.00"/>
Name of Employer	Occupation	
STUDENT	STUDENT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="281.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MS. ALEXA DUNETZ</b>		Date of Receipt
Mailing Address 28 CAMPBELL DRIVE		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
DIX HILLS	NY	11746-7902
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI01648
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="120.00"/>
Name of Employer	Occupation	
STUDENT	STUDENT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="281.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MS. ALEXA DUNETZ</b>		Date of Receipt
Mailing Address 28 CAMPBELL DRIVE		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
DIX HILLS	NY	11746-7902
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI01649
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1.00"/>
Name of Employer	Occupation	
STUDENT	STUDENT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="281.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="141.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 655 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT L. DUNHAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 1918 4TH STREET A.

City EAST MOLINE State IL Zip Code 61244-2417

FEC ID number of contributing federal political committee. **C**

Name of Employer ELECTRONIC BUSINESS EQUIPMENT Occupation COMPUTER PROGRAMMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01650**

Amount of Each Receipt this Period  
 1000.00

**B. MR. CLYDE F. DUNN**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4088

City BROOKINGS State OR Zip Code 97415-0070

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01651**

Amount of Each Receipt this Period  
 36.00

**C. MRS. J. L. DUNN III**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 SOUTHERN CROSS

City GALVESTON State TX Zip Code 77554

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01652**

Amount of Each Receipt this Period  
 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2536.00

**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 656 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. VIRGINIA DUNNIGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 423  
 City WALHALLA State ND Zip Code 58282-0423  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation AGRIBUSINESS  
 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  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01653**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. LESLIE W. DUNSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 129 N. LAKE FLORENCE DRIVE  
 City WINER HAVEN State FL Zip Code 33884-0589  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01654**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. LLOYD DURBY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 303 KISSINGBOWER ROAD  
 City VIDALIA State GA Zip Code 30474-5434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01655**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1050.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 657 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. LYNN DUREN**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 236

City DOUGLASSVILLE State TX Zip Code 75560-0236

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01656**

Amount of Each Receipt this Period  
 110.00

**B. DR. LYNN DUREN**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 236

City DOUGLASSVILLE State TX Zip Code 75560-0236

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01657**

Amount of Each Receipt this Period  
 35.00

**C. MR. MICHAEL R. DURHAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 9040 OLD HAGGARD ROAD

City MORGANTOWN State IN Zip Code 46160-8902

FEC ID number of contributing federal political committee. **C**

Name of Employer BLUELOCK, L.L.C. Occupation IT SPECIALIST

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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01658**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	395.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 658 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANK M. DURRANCE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1349 S. INTERNATIONAL PARKWAY #142  
 City LAKE MARY State FL Zip Code 32746-1698  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation C.P.A.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01659**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. SYLVIA DURYEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1115 41ST AVVENUE E.  
 City SEATTLE State WA Zip Code 98112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 751.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01660**  
 Amount of Each Receipt this Period  
 751.00

**C. MRS. KATIE N. DUSENBERRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7495 S. RINCON VISTA TRAIL  
 7495 S. RINCON VISTA TRAIL  
 City TUCSON State AZ Zip Code 85747-9158  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01661**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1351.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 659 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KATIE N. DUSENBERRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7495 S. RINCON VISTA TRAIL  
 7495 S. RINCON VISTA TRAIL  
 City TUCSON State AZ Zip Code 85747-9158  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01662**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. DANIEL M. DVORCHAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 85 AVENUE DE LA MER  
 UNIT 803  
 City PALM COAST State FL Zip Code 32137-1229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01663**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. DONALD DYAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1734 MAIN STREET  
 City DELANO State CA Zip Code 93215-1449  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01664**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	330.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 660 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JOHN DYE**

Mailing Address 1139 COVE POINTE DRIVE

City PANAMA CITY      State FL      Zip Code 32401-3793

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01665**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. PERRY O. DYE**

Mailing Address 10157 E. FAIR CIRCLE

City ENGLEWOOD      State CO      Zip Code 80111-5448

FEC ID number of contributing federal political committee. **C**

Name of Employer DYE DESIGNS INTERNATIONAL      Occupation GOLF COURSE DESIGNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01666**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**C. MRS. MICHELE M. EAKINS**

Mailing Address 115 N. 53RD STREET

City OMAHA      State NE      Zip Code 68132-2808

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED      Occupation TEXTILE ARTIST

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01667**

Amount of Each Receipt this Period  
110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 361.00

**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 661 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CARLETON CATO EALY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3160 DEVONSHIRE WAY  
 City State Zip Code  
 GERMANTOWN TN 38139-8045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INTERNATIONAL PAPER COMPANY FINANCE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01668**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. EDWARD EANES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5918 BAYOU BEND  
 City State Zip Code  
 WINDCREST TX 78239-2617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01669**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. ALAN LEE EARHART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1370 PRITCHETT COURT  
 City State Zip Code  
 LOS ALTOS CA 94024-5711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01670**  
 Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5500.00  
**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 662 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. FRANKLIN LAWRENCE EARLE</b>		Date of Receipt
Mailing Address 3 CARRION COURT APARTMENT 101		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAN JUAN	PR	00911-1227
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>2014M04L11AI01671</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="120.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="330.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. JOHN T. EARLY II</b>		Date of Receipt
Mailing Address 1S946 GROVE HILL DRIVE		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
BATAVIA	IL	60510-9525
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>2014M04L11AI01672</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	SALES & MARKETING MANAGEMENT	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. WILLIAM H. EASON JR.</b>		Date of Receipt
Mailing Address 1520 GRAYBAR LANE		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
NASHVILLE	TN	37215-1626
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>2014M04L11AI01673</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1370.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 663 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. HARRY D. EAST**

Mailing Address P.O. BOX 165

City MARION State AR Zip Code 72364-0165

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01674**

Amount of Each Receipt this Period  
 250.00

Full Name (Last, First, Middle Initial)  
**B. MR. JOHN EASTER**

Mailing Address 315 N. LA GRANGE ROAD APARTMENT 627

City LA GRANGE PARK State IL Zip Code 60526-5018

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01675**

Amount of Each Receipt this Period  
 301.00

Full Name (Last, First, Middle Initial)  
**C. MR. WILLIAM E. EASTHAM**

Mailing Address 1840 N. PROSPECT AVENUE APARTMENT 812

City MILWAUKEE State WI Zip Code 53202-1997

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01676**

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1551.00

**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 664 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANK H. EATON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18 SANTA MARIA COURT  
 City ODESSA State TX Zip Code 79765-8515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MASTER CORPORATION Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01677**  
 Amount of Each Receipt this Period  
 201.00

**B. MR. JOHN D. EATON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1120 MICHIGAN STREET  
 City BELLEFONTAINE State OH Zip Code 43311-2519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI01678**  
 Amount of Each Receipt this Period  
 120.00

**C. MRS. KENNETH A. EBI JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6822 ROCK CREST LANE  
 City CITRUS HEIGHTS State CA Zip Code 95621-8369  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01679**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 571.00  
**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 665 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN J. ECCLESTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32 DEVEREUX DRIVE  
 City MANCHESTER State NJ Zip Code 08759-6062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01680**  
 Amount of Each Receipt this Period  
 110.00

**B. MR. JOHN J. ECCLESTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32 DEVEREUX DRIVE  
 City MANCHESTER State NJ Zip Code 08759-6062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01681**  
 Amount of Each Receipt this Period  
 110.00

**C. MR. RALPH J. ECKERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4766 HIGHLAND PARK DRIVE  
 City SLINGER State WI Zip Code 53086-9441  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01682**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 720.00  
**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 666 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ARLETTE M. EDDY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4408 PEYTONA LANE  
 City State Zip Code  
 FRANKLIN TN 37064-8019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 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  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01683**  
 Amount of Each Receipt this Period  
 300.00

**B. MRS. MARJORIE C. EDDY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 MCKNIGHT PLACE  
 APARTMENT 285  
 City State Zip Code  
 SAINT LOUIS MO 63124-1992  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01684**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. MARJORIE C. EDDY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 MCKNIGHT PLACE  
 APARTMENT 285  
 City State Zip Code  
 SAINT LOUIS MO 63124-1992  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01685**  
 Amount of Each Receipt this Period  
 400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**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 667 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. NANCY EDELBROCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14 ROADRUNNER ROAD  
 City State Zip Code  
 ROLLING HILLS CA 90274-5139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01686**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. CHARLES J. EDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 CAYUGA AVENUE  
 City State Zip Code  
 EAST NORTHPORT NY 11731-1044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01687**  
 Amount of Each Receipt this Period  
 25.00

**C. MR. CHARLES J. EDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 CAYUGA AVENUE  
 City State Zip Code  
 EAST NORTHPORT NY 11731-1044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01688**  
 Amount of Each Receipt this Period  
 26.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 101.00  
**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 668 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DON E. EDGERTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6996 W. BLANDING ROAD  
 City HANOVER State IL Zip Code 61041-9602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI01689**  
 Amount of Each Receipt this Period 200.00

**B. MR. BOBBIE GEORGE EDGINGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4370 N ROUTE E  
 City COLUMBIA State MO Zip Code 65202-8732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01690**  
 Amount of Each Receipt this Period 560.00

**C. MR. ANDREW W. EDMONDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 644000  
 City VERO BEACH State FL Zip Code 32964-4000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2001.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01691**  
 Amount of Each Receipt this Period 501.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1081.00  
**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 669 OF 2949
	(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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. J. DICKSON EDSON JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 1855 MARSHLAND ROAD

City APALACHIN	State NY	Zip Code 13732-1438
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
236.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2014

**Transaction ID : 2014M04L11AI01692**

Amount of Each Receipt this Period  
100.00

**B. MR. J. DICKSON EDSON JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 1855 MARSHLAND ROAD

City APALACHIN	State NY	Zip Code 13732-1438
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
236.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2014

**Transaction ID : 2014M04L11AI01693**

Amount of Each Receipt this Period  
25.00

**C. MR. J. DICKSON EDSON JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 1855 MARSHLAND ROAD

City APALACHIN	State NY	Zip Code 13732-1438
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
236.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI01694**

Amount of Each Receipt this Period  
26.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	151.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 670 OF 2949
	<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
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRUCE E. EDSTEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 225 CURTIS WAY  
 City TAYLORSVILLE State KY Zip Code 40071-9510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01695**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. DAVID RONALD EDWARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5912 SHARON HILLS ROAD  
 City CHARLOTTE State NC Zip Code 28210-7003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01696**  
 Amount of Each Receipt this Period  
 126.00

**C. MR. FORREST WILLIAM EDWARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7346 CLIPPER OAK DRIVE  
 City SAN ANTONIO State TX Zip Code 78249-3638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ALLIED BARTON SECURITY SERVICES Occupation SECURITY OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI01697**  
 Amount of Each Receipt this Period  
 2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2176.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 671 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRED EDWARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2209 CLAIRMONT CIRCLE  
 City AUBURN State AL Zip Code 36830-6630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01698**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. MARTIN EDWARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 22237  
 City BEAUMONT State TX Zip Code 77720-2237  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INSURANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01699**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. MELINDA M. EDWARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5256 WILKINS AVENUE  
 City PITTSBURGH State PA Zip Code 15217-1072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI01700**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 672 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RAY W. EDWARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4137 COACHMAN'S COURT  
 City HIGH POINT State NC Zip Code 27262-5019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI01701**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. THOMAS EDWARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2412 39TH STREET  
 City GALVESTON State TX Zip Code 77550-8811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01702**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. THOMAS EDWARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1082 PATTERSON MILL DRIVE  
 City MARTIN State SC Zip Code 29836-2520  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01703**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1051.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 673 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WALTER J. EDWARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 535 FORD AVENUE  
 City SOLANA BEACH State CA Zip Code 92075-1306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 WELLS FARGO BANKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01704**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. J. ROBERT EGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1418 LINCOLN LANE  
 City NEWPORT BEACH State CA Zip Code 92660-4936  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01705**  
 Amount of Each Receipt this Period  
 201.00

**C. MR. JOHN F. EGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 BEVERLEE DRIVE  
 City NASHUA State NH Zip Code 03064-1674  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 236.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01706**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 452.00  
**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 674 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT B. EGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2666 FENNO DR  
 City State Zip Code  
 CORDILLERA CO 81632-6014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED C.P.A.  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01707**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. ROBERT J. EGLY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2681 CAMERON PARK DRIVE  
 SPACE 90  
 City State Zip Code  
 CAMERON PARK CA 95682-8840  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 371.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01708**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. JOHN EICHLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 FELLSWOOD DRIVE  
 City State Zip Code  
 VERONA NJ 07044-1111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MIZUTTO SECURITIES, USA INVESTMENT BANKER  
 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  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01709**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 675 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JEROME JOSEPH EISEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6601S WESTSHORE BLVD.  
 APT3413  
 City TAMPA State FL Zip Code 33616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FARMER/RANCHER Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01710**  
 Amount of Each Receipt this Period  
 5.00

**B. MR. JEROME JOSEPH EISEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6601S WESTSHORE BLVD.  
 APT3413  
 City TAMPA State FL Zip Code 33616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PEDIATRICIAN Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01711**  
 Amount of Each Receipt this Period  
 10.00

**C. MR. JEROME JOSEPH EISEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6601S WESTSHORE BLVD.  
 APT3413  
 City TAMPA State FL Zip Code 33616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNEMPLOYED Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01712**  
 Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 676 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JEROME JOSEPH EISEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6601S WESTSHORE BLVD.  
 APT3413  
 City TAMPA State FL Zip Code 33616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01713**  
 Amount of Each Receipt this Period  
 10.00

**B. MR. JEROME JOSEPH EISEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6601S WESTSHORE BLVD.  
 APT3413  
 City TAMPA State FL Zip Code 33616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01714**  
 Amount of Each Receipt this Period  
 10.00

**C. MR. JEROME JOSEPH EISEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6601S WESTSHORE BLVD.  
 APT3413  
 City TAMPA State FL Zip Code 33616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNEMPLOYED Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01715**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00  
**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 677 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JEROME JOSEPH EISEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6601S WESTSHORE BLVD.  
 APT3413  
 City TAMPA State FL Zip Code 33616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REAL ESTATE Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01716**  
 Amount of Each Receipt this Period 5.00

**B. MR. JEROME JOSEPH EISEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6601S WESTSHORE BLVD.  
 APT3413  
 City TAMPA State FL Zip Code 33616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REAL ESTATE Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01717**  
 Amount of Each Receipt this Period 25.00

**C. MR. JEROME JOSEPH EISEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6601S WESTSHORE BLVD.  
 APT3413  
 City TAMPA State FL Zip Code 33616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNEMPLOYED Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01718**  
 Amount of Each Receipt this Period 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40.00  
**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 678 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD IRWIN EISENBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3773 COVENTRY LANE  
 City BOCA RATON State FL Zip Code 33496-4060  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PROPERTY MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01719**  
 Amount of Each Receipt this Period 120.00

**B. MR. TIMOTHY EISENMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2608 W. 20TH PLACE  
 City YUMA State AZ Zip Code 85364-6005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01720**  
 Amount of Each Receipt this Period 120.00

**C. MR. TIMOTHY EISENMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2608 W. 20TH PLACE  
 City YUMA State AZ Zip Code 85364-6005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01721**  
 Amount of Each Receipt this Period 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 241.00  
**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 679 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BERNARD R. EISENSELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3988 E. MORNING DOVE TRAIL  
 City PHOENIX State AZ Zip Code 85050-5420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01722**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. BERNARD R. EISENSELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3988 E. MORNING DOVE TRAIL  
 City PHOENIX State AZ Zip Code 85050-5420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01723**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. BERNARD R. EISENSELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3988 E. MORNING DOVE TRAIL  
 City PHOENIX State AZ Zip Code 85050-5420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01724**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 520.00  
**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 680 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN JOSEPH EKELUND**  
Full Name (Last, First, Middle Initial)

Mailing Address 1420 VIA MARETTIMO

City State Zip Code  
MONTEREY CA 93940-6416

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01725**

Amount of Each Receipt this Period  
120.00

**B. MR. CHARLES A. ELCAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1034 CHANCERY LANE S.

City State Zip Code  
NASHVILLE TN 37215-4524

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
CHINA HEALTHCARE CORPORATION PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01726**

Amount of Each Receipt this Period  
550.00

**C. MR. CHARLES E. ELDON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1385 LONGFELLOW WAY

City State Zip Code  
SAN JOSE CA 95129-3769

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01727**

Amount of Each Receipt this Period  
215.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 885.00

**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 681 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD ELDRIDGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 126 SHORE DRIVE  
 City NASHUA State NH Zip Code 03062-1368  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WILLIAM GEROGUE GROUP Occupation PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01728**  
 Amount of Each Receipt this Period  
 120.00

**B. MRS. LORRAINE M. ELIASON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10306 COLORADO ROAD S.  
 City BLOOMINGTON State MN Zip Code 55438-1844  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01729**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. ELIZABETH ELKIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2037 NAUDAIN ST.  
 City PHILADELPHIA State PA Zip Code 19146-1316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01730**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	470.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 682 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. LESTER ELLEFSON</b>		Date of Receipt
Mailing Address P.O. BOX 178		M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014
City	State	Zip Code
MILNOR	ND	58060-0178
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI01731
C		Amount of Each Receipt this Period
		250.00
Name of Employer	Occupation	
HOMEMAKER	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	250.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. NAUMANN ELLEN</b>		Date of Receipt
Mailing Address 3520 BRIGHTON WAY		M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014
City	State	Zip Code
RENO	NV	89509-3870
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI01731
C		Amount of Each Receipt this Period
		500.00
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	500.00	

Full Name (Last, First, Middle Initial) <b>C. MR. BOYD ALLEN ELLESTAD</b>		Date of Receipt
Mailing Address 30508 SANTA LUNA DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 25 / 2014
City	State	Zip Code
RANCHO PALOS VERDES	CA	90275-6318
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI01731
C		Amount of Each Receipt this Period
		100.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	306.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 683 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BOYD ALLEN ELLESTAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30508 SANTA LUNA DRIVE  
 City RANCHO PALOS VERDES State CA Zip Code 90275-6318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01734**  
 Amount of Each Receipt this Period 1.00

**B. MR. PAUL ELLGEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2104 W. FIRST STREET APARTMENT 1601  
 City FORT MYERS State FL Zip Code 33901-3269  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01735**  
 Amount of Each Receipt this Period 2000.00

**C. MS. GLADYS V. ELLIFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2552 E. ALAMEDA AVENUE UNIT 90  
 City DENVER State CO Zip Code 80209-3322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01736**  
 Amount of Each Receipt this Period 400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2401.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 684 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. NORMA C. ELLINGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1227 W. BARKER AVENUE  
 City PEORIA State IL Zip Code 61606-1705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01737**  
 Amount of Each Receipt this Period  
 275.00

**B. MR. RAYMOND A. ELLIOTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 265 MOUNTAIN VIEW AVENUE  
 City DANVILLE State VA Zip Code 24541-3501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01738**  
 Amount of Each Receipt this Period  
 105.00

**C. MR. WILLIAM ELLIOTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2024 OAK GROVE ROAD  
 City HOWELL State MI Zip Code 48855-9702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation AUTO PARTS REBUILDER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01739**  
 Amount of Each Receipt this Period  
 400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	780.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 685 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALVIN A. ELLIS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18 ELLIS LANE  
 City RED LODGE State MT Zip Code 59068-9647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01740**  
 Amount of Each Receipt this Period  
 500.00

**B. DR. JOHN N. ELLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 APAWAMIS CIRCLE  
 City PINEHURST State NC Zip Code 28374-7172  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 341.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01741**  
 Amount of Each Receipt this Period  
 120.00

**C. DR. JOHN N. ELLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 APAWAMIS CIRCLE  
 City PINEHURST State NC Zip Code 28374-7172  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 341.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01742**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 621.00  
**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 686 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. ROBERT S. ELLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6703 AVONDALE DRIVE  
 City State Zip Code  
 NICHOLS HILLS OK 73116-6001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01743**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. LUTHER F. ELLISON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 680 E. BASSE ROAD  
 APARTMET 127  
 City State Zip Code  
 SAN ANTONIO TX 78209-7431  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01744**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. LUTHER F. ELLISON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 680 E. BASSE ROAD  
 APARTMET 127  
 City State Zip Code  
 SAN ANTONIO TX 78209-7431  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01745**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 687 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES ELLSWORTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1230  
 City CUSHING State OK Zip Code 74023-1230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01746**  
 Amount of Each Receipt this Period  
 250.00

**B. MS. EUNICE C. ELLSWORTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1545 BROADWAY APARTMENT 4K  
 City WATERVLIET State NY Zip Code 12189-2814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01747**  
 Amount of Each Receipt this Period  
 30.00

**C. MS. EUNICE C. ELLSWORTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1545 BROADWAY APARTMENT 4K  
 City WATERVLIET State NY Zip Code 12189-2814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01748**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 688 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. EUNICE C. ELLSWORTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1545 BROADWAY  
 APARTMENT 4K  
 City WATERVLIET State NY Zip Code 12189-2814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01749**  
 Amount of Each Receipt this Period 10.00

**B. MS. EUNICE C. ELLSWORTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1545 BROADWAY  
 APARTMENT 4K  
 City WATERVLIET State NY Zip Code 12189-2814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01750**  
 Amount of Each Receipt this Period 26.00

**C. DR. DAVID L. ELSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 513 E. PLUM CREEK ROAD  
 City SIOUX FALLS State SD Zip Code 57105-6950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AVERA HEALTH Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01751**  
 Amount of Each Receipt this Period 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 146.00  
**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 689 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. DAVID L. ELSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 513 E. PLUM CREEK ROAD  
 City State Zip Code  
 SIOUX FALLS SD 57105-6950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 AVERA HEALTH PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 570.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01752**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. LLOYD W. ELSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15465 179TH AVENUE S.E.  
 APARTMENT 114  
 City State Zip Code  
 MONROE WA 98272-1734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01753**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. LLOYD W. ELSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15465 179TH AVENUE S.E.  
 APARTMENT 114  
 City State Zip Code  
 MONROE WA 98272-1734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01754**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00  
**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 690 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LLOYD W. ELSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15465 179TH AVENUE S.E.  
 APARTMENT 114  
 City MONROE State WA Zip Code 98272-1734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01755**  
 Amount of Each Receipt this Period  
 75.00

**B. MRS. NANCY S. EMBERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7017 CYPRESS BRIDGE DRIVE N.  
 City PONTE VEDRA State FL Zip Code 32082-2512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01756**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. DALE R. EMERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1150 BAY STREET  
 City ALAMEDA State CA Zip Code 94501-3912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 556.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01757**  
 Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	385.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 691 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DALE R. EMERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1150 BAY STREET

City ALAMEDA State CA Zip Code 94501-3912

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **556.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**

**Transaction ID : 2014M04L11AI01758**

Amount of Each Receipt this Period  
**91.00**

**B. MR. DALE R. EMERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1150 BAY STREET

City ALAMEDA State CA Zip Code 94501-3912

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **556.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 26 / 2014**

**Transaction ID : 2014M04L11AI01759**

Amount of Each Receipt this Period  
**135.00**

**C. MR. WAYNE EMMOTT**  
Full Name (Last, First, Middle Initial)

Mailing Address 7511 LANGTRY

City HOUSTON State TX Zip Code 77040-6630

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation BINDERY SERVICE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2014**

**Transaction ID : 2014M04L11AI01760**

Amount of Each Receipt this Period  
**120.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **346.00**

**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 692 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. IRENE M. ENDICOTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 617 143RD STREET NW  
 City MARYSVILLE State WA Zip Code 98271-8132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FREEDOM FOUNDATION Occupation DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01761**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. MARIANNE T. ENDICOTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 STRATTON PLACE  
 City GROSE POINTE SHORES State MI Zip Code 48236-1771  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VOLUNTEER Occupation VOLUNTEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01762**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. CHARLES ENGBRETSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 713 5TH AVE N  
 City SARTELL State MN Zip Code 56377  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ARRAY SERVICES GROUP, INC. Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI01763**  
 Amount of Each Receipt this Period  
 400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 693 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PAULA ENGELING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 42 RANCH ROAD  
 City SEQUIM State WA Zip Code 98382-7493  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01764**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. W. J. ENGLADE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1615  
 City GONZALES State LA Zip Code 70707-1615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01765**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. JUNE R. ENGLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX A.  
 City EL VERANO State CA Zip Code 95433-0020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01766**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 694 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JUNE R. ENGLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX A.  
 City EL VERANO State CA Zip Code 95433-0020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01767**  
 Amount of Each Receipt this Period  
 66.00

**B. MRS. MABEL C. ENGLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1736 W, ORANGEWOOD LANE  
 City AVON PARK State FL Zip Code 33825-8082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01768**  
 Amount of Each Receipt this Period  
 30.00

**C. MRS. MABEL C. ENGLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1736 W, ORANGEWOOD LANE  
 City AVON PARK State FL Zip Code 33825-8082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01769**  
 Amount of Each Receipt this Period  
 31.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	127.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 695 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JOEL D. ENGLE**

Mailing Address 506 ARLINGTON DRIVE

City State Zip Code  
MARSHALLTOWN IA 50158-4311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED FARMER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01770**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. KEITH ENGLEHART**

Mailing Address 961 ROAD 2900

City State Zip Code  
AZTEC NM 87410-9760

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01771**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**C. MRS. MARIAN F. ENGLISH**

Mailing Address 4 ANN STREET

City State Zip Code  
FULTON MO 65251-1573

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01772**

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00

**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 696 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARIAN F. ENGLISH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 ANN STREET  
 City State Zip Code  
 FULTON MO 65251-1573  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01773**  
 Amount of Each Receipt this Period  
 20.00

**B. MRS. MARIAN F. ENGLISH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 ANN STREET  
 City State Zip Code  
 FULTON MO 65251-1573  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01774**  
 Amount of Each Receipt this Period  
 30.00

**C. MRS. MARIAN F. ENGLISH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 ANN STREET  
 City State Zip Code  
 FULTON MO 65251-1573  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01775**  
 Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00  
**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 697 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARIAN F. ENGLISH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 ANN STREET  
 City State Zip Code  
 FULTON MO 65251-1573  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01776**  
 Amount of Each Receipt this Period  
 31.00

**B. MR. MELVYN F. ENGLISH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 625 SAWYER WAY  
 City State Zip Code  
 SPARKS NV 89431-2267  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 STEAMBOAT TRAILER MECHANIC  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI01777**  
 Amount of Each Receipt this Period  
 20.00

**C. MR. MELVYN F. ENGLISH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 625 SAWYER WAY  
 City State Zip Code  
 SPARKS NV 89431-2267  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 STEAMBOAT TRAILER MECHANIC  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01778**  
 Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 161.00  
**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 698 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. MELVYN F. ENGLISH</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014 <b>Transaction ID : 2014M04L11AI01779</b>
Mailing Address 625 SAWYER WAY		Amount of Each Receipt this Period 451.00
City SPARKS	State NV	Zip Code 89431-2267
FEC ID number of contributing federal political committee. C		
Name of Employer STEAMBOAT TRAILER	Occupation MECHANIC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. DONNA M. ENGMANN</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI01780</b>
Mailing Address 38 SAN FERNANDO WAY		Amount of Each Receipt this Period 201.00
City SAN FRANCISCO	State CA	Zip Code 94127-1504
FEC ID number of contributing federal political committee. C		
Name of Employer ARCHDIOCESE OF SAN FRANCISCO	Occupation SUB. TEACHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

Full Name (Last, First, Middle Initial) <b>C. MR. JOHN ROBERT ENGQUIST JR.</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2014 <b>Transaction ID : 2014M04L11AI01781</b>
Mailing Address 36W 121 FIELDCREST DRIVE		Amount of Each Receipt this Period 200.00
City SAINT CHARLES	State IL	Zip Code 60175-5173
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	451.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 699 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN ROBERT ENGQUIST JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 36W 121 FIELDCREST DRIVE  
 City SAINT CHARLES State IL Zip Code 60175-5173  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01782**  
 Amount of Each Receipt this Period  
 120.00

**B. DR. PERRY H. ENGSTROM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 807 2ND STREET N.  
 City WAHPETON State ND Zip Code 58075-3401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01783**  
 Amount of Each Receipt this Period  
 200.00

**C. MRS. CLIFFORD ENOCKSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2908 TYLER PARKWAY  
 City BISMARCK State ND Zip Code 58503-0178  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01784**  
 Amount of Each Receipt this Period  
 400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 720.00  
**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 700 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. PAUL G. ENSOR**  
Full Name (Last, First, Middle Initial)

Mailing Address 14630 BURNTWOODS ROAD

City GLENWOOD State MD Zip Code 21738-9609

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01785**

Amount of Each Receipt this Period  
 1.00

**B. MS. RENA M. EPPING**  
Full Name (Last, First, Middle Initial)

Mailing Address 30621 52ND STREET

City SALEM State WI Zip Code 53168-9260

FEC ID number of contributing federal political committee. **C**

Name of Employer CREATIVE CONCRETE, INC. Occupation CONTRACTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01786**

Amount of Each Receipt this Period  
 110.00

**C. MS. RENA M. EPPING**  
Full Name (Last, First, Middle Initial)

Mailing Address 30621 52ND STREET

City SALEM State WI Zip Code 53168-9260

FEC ID number of contributing federal political committee. **C**

Name of Employer CREATIVE CONCRETE, INC. Occupation CONTRACTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01787**

Amount of Each Receipt this Period  
 111.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 222.00

**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 701 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JERRY EPSTEIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12320 MONTANA AVENUE  
 City State Zip Code  
 LOS ANGELES CA 90049-5251  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED REAL ESTATE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01788**  
 Amount of Each Receipt this Period  
 501.00

**B. MR. DAVID H. ERASMUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1470 SHORELINE WAY  
 City State Zip Code  
 HOLLYWOOD FL 33019-5006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01789**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. MARTHA ERB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1158A ALBER STREET #A  
 City State Zip Code  
 WABASH IN 46992-1005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01790**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 752.00  
**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 702 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. G. R. ERICKSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 8480 MISSION HILLS CIRCLE

City CHANHASSEN	State MN	Zip Code 55317-7720
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01791**

Amount of Each Receipt this Period  
 60.00

**B. DR. ANN MARIE ERNST**  
Full Name (Last, First, Middle Initial)

Mailing Address 4850 LAKESHORE ROAD

City FORT GRATIOT	State MI	Zip Code 48059-3538
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01792**

Amount of Each Receipt this Period  
 220.00

**C. ROBERT ERRICO**  
Full Name (Last, First, Middle Initial)

Mailing Address 3991 MACARTHUR BLVD.  
SUITE 250

City NEWPORT BEACH	State CA	Zip Code 92660-3039
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation FINANCIAL ADVISOR
-----------------------------------	---------------------------------

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  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01793**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	380.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 703 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. ROBERT ERRICO**

Mailing Address 3991 MACARTHUR BLVD.  
SUITE 250

City NEWPORT BEACH      State CA      Zip Code 92660-3039

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED      Occupation FINANCIAL ADVISOR

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  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01794**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. WILLIAM D. ERWIN**

Mailing Address 16696 W. UA BEEF FARM ROAD

City FAYETTEVILLE      State AR      Zip Code 72704-8539

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01795**

Amount of Each Receipt this Period  
91.00

Full Name (Last, First, Middle Initial)  
**C. MR. WILLIAM D. ERWIN**

Mailing Address 16696 W. UA BEEF FARM ROAD

City FAYETTEVILLE      State AR      Zip Code 72704-8539

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01796**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 241.00

**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 704 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROGER ESLICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2834 380TH STREET  
 City DAYTON State IA Zip Code 50530-7573  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1110.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01797**  
 Amount of Each Receipt this Period  
 750.00

**B. MR. CHARLES EDWIN ESMEIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1103 POTASH AVENUE  
 City ALLIANCE State NE Zip Code 69301-2767  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01798**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. CHARLES EDWIN ESMEIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1103 POTASH AVENUE  
 City ALLIANCE State NE Zip Code 69301-2767  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01799**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 705 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALEX ESPINOZA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16472 FM 457

City BAY CITY	State TX	Zip Code 77414-2698
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer S. L. CONTRACTORS	Occupation ESTIMATER
---------------------------------------	-------------------------

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  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01800**

Amount of Each Receipt this Period  
 750.00

**B. MR. RICK ESPOSITO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 HAMILTON ROAD

City HARRISON	State NY	Zip Code 10528-1504
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NORTH SHORE UNIVERSITY MEDICAL CENTER	Occupation PHYSICIAN
---	-------------------------

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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01801**

Amount of Each Receipt this Period  
 300.00

**C. DR. THOMAS W. ESSEX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 TODD ESTATE DRIVE

City CHICKASHA	State OK	Zip Code 73018-5140
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer GRADY MEMORIAL HOSPITAL	Occupation DOCTOR
---	----------------------

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  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01802**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 706 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TIMOTHY W. ESTES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 5417  
 City PASADENA State CA Zip Code 91117-0417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FIESTA PARADE FLOATS Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **481.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01803**  
 Amount of Each Receipt this Period  
**1.00**

**B. MR. CRAIG ESTEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3051 ARABIAN ROAD  
 City LAS VEGAS State NV Zip Code 89107-4540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NV RESTAURANT SERVICES Occupation MANAGEMENT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **9800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01804**  
 Amount of Each Receipt this Period  
**9800.00**

**C. MR. GORDON J. ESTEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 66 CHAPEL STREET  
 City CANANDAIGUA State NY Zip Code 14424-1102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LIGHTING DESIGNER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **216.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01805**  
 Amount of Each Receipt this Period  
**111.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>9912.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 707 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. PATRICIA RIVERS ESTEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3051 ARABIAN ROAD  
 City LAS VEGAS State NV Zip Code 89107-4540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF - EMPLOYED Occupation RESTAURATEUR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 9800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01806**  
 Amount of Each Receipt this Period  
 9800.00

**B. MRS. LUCEIL ESTRIDGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3907 COUNTRY CLUB ROAD  
 City ARLINGTON State TX Zip Code 76013-3047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01807**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. KEN ETHERIDGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 8  
 City KENLY State NC Zip Code 27542-0008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ETHERIDGE OIL CO. Occupation PETROLEUM MARKETER  
 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  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01808**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	10400.00
<b>TOTAL</b> This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 708 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT EUBANK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20218 POST OAK HILL DR  
 City SPRING State TX Zip Code 77388-5459  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LONER STAR COLLEGE Occupation COLLEGE PROFESSOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01809**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. VERA P. EUBANK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 WILSHIRE ROAD  
 City OCEANSIDE State CA Zip Code 92057-2109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01810**  
 Amount of Each Receipt this Period  
 35.00

**C. MRS. VERA P. EUBANK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 WILSHIRE ROAD  
 City OCEANSIDE State CA Zip Code 92057-2109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01811**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	255.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 709 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANK J. EUSTACE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 72C NOD ROAD  
 City RIDGEFIELD State CT Zip Code 06877-5814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI01812**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. CHRIS EVANICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1585 BARRINGTON WOODS DRIVE  
 City BROOKFIELD State WI Zip Code 53045-2212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ORTHOPEDIC SURGEON  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01813**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. DONALD C. EVANS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 43  
 City ASH State NC Zip Code 28420-0043  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COASTAL INSURANCE Occupation INSURANCE AGENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01814**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 710 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. GLORIA EVANS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5203 DOE VALLEY LANE  
 City AUSTIN State TX Zip Code 78759-7103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01815**  
 Amount of Each Receipt this Period  
 120.00

**B. REV. JIMMIE I. EVANS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1308 DYLAN CIRCLE  
 City HENDERSON State KY Zip Code 42420-5338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01816**  
 Amount of Each Receipt this Period  
 65.00

**C. REV. JIMMIE I. EVANS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1308 DYLAN CIRCLE  
 City HENDERSON State KY Zip Code 42420-5338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01817**  
 Amount of Each Receipt this Period  
 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 240.00  
**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 711 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. REV. JIMMIE I. EVANS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1308 DYLAN CIRCLE  
 City Henderson State KY Zip Code 42420-5338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01818**  
 Amount of Each Receipt this Period 56.00

**B. MR. THOMAS E. EVANS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 658  
 City Elberton State GA Zip Code 30635-0658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation GEOLOGIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01819**  
 Amount of Each Receipt this Period 100.00

**C. MR. THOMAS E. EVANS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 658  
 City Elberton State GA Zip Code 30635-0658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation GEOLOGIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01820**  
 Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 306.00  
**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 712 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. MARY J. EVERS**

Mailing Address P.O. BOX 53426

City State Zip Code  
CINCINNATI OH 45253-0426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01821**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. DR. WILLIAM EVERS MANN**

Mailing Address 14530 HEADWATER BAY LANE

City State Zip Code  
FORT MYERS FL 33908-4948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01822**

Amount of Each Receipt this Period  
150.00

Full Name (Last, First, Middle Initial)  
**C. DR. WILLIAM EVERS MANN**

Mailing Address 14530 HEADWATER BAY LANE

City State Zip Code  
FORT MYERS FL 33908-4948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01823**

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00

**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 713 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JEAN L. EVVARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21 WEEKS ROAD  
 City State Zip Code  
 GILFORD NH 03249-6831  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01824**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. DENNIS EWING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 482 FAWNCOVE LANE  
 City State Zip Code  
 AMES IA 50010-9392  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 KRUGER SEED COMPANY DIRECTOR OF RESEARCH  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01825**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. FRED W. EWING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6419 ARDEN COURT  
 City State Zip Code  
 BRENTWOOD TN 37027-5660  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MANAGER MANAGER  
 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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01826**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 714 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRED W. EWING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6419 ARDEN COURT  
 City BRENWOOD State TN Zip Code 37027-5660  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MANAGER Occupation MANAGER  
 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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01827**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. ROBERT N. EWING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6702 NORTH 36TH STREET  
 City PHOENIX State AZ Zip Code 85018-1014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 237.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01828**  
 Amount of Each Receipt this Period  
 202.00

**C. DR. STEVEN EYANSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3805 TAMA STREET SE  
 City CEDAR RAPIDS State IA Zip Code 52403-4557  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 815.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01829**  
 Amount of Each Receipt this Period  
 815.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1517.00  
**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 715 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ROSE ANN EYHERABIDE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18912 WEST INDIAN SCHOOL ROAD  
 City State Zip Code  
 LITCHFIELD PARK AZ 85340-9527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED RANCHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01830**  
 Amount of Each Receipt this Period  
 501.00

**B. MR. PAUL EYMARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4910 BOULDER TRACE LANE  
 City State Zip Code  
 KATY TX 77449-7706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01831**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. PAUL EYMARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4910 BOULDER TRACE LANE  
 City State Zip Code  
 KATY TX 77449-7706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01832**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 801.00  
**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 716 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. GLENN EZELL**

Mailing Address 2224 VALCOURT DRIVE

City PLANO State TX Zip Code 75023-1623

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation SALES MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01833**

Amount of Each Receipt this Period  
 250.00

Full Name (Last, First, Middle Initial)  
**B. MR. KELLEY A. EZELL**

Mailing Address 16318 HEATHER BEND COURT

City HOUSTON State TX Zip Code 77059-5579

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01834**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**C. MR. HENRY SPEER EZZARD JR**

Mailing Address 13959 CARRIAGE RD

City POWAY State CA Zip Code 92064-3837

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01835**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

**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 717 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALAN J. EZZELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1519 SCARBOROUGH COURT  
APARTMENT 105

City WEST CHESTER State PA Zip Code 19380-3506

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01836**

Amount of Each Receipt this Period  
125.00

**B. MR. ALAN J. EZZELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1519 SCARBOROUGH COURT  
APARTMENT 105

City WEST CHESTER State PA Zip Code 19380-3506

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01837**

Amount of Each Receipt this Period  
100.00

**C. MR. ALAN J. EZZELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1519 SCARBOROUGH COURT  
APARTMENT 105

City WEST CHESTER State PA Zip Code 19380-3506

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01838**

Amount of Each Receipt this Period  
120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	345.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 718 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PETER W. FAHEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1701 NEWTON STREET  
 City State Zip Code  
 SIDNEY NE 69162-1968  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01839**  
 Amount of Each Receipt this Period  
 51.00

**B. DR. JONATHAN T. FAIRBANK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 223 N. GUADALUPE #476  
 City State Zip Code  
 SANTA FE NM 87501-1868  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01840**  
 Amount of Each Receipt this Period  
 221.00

**C. MR. JAY FAIRVALLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 TIDEPOINTE WAY  
 APARTMENT 5210  
 City State Zip Code  
 HILTON HEAD ISLAND SC 29928-3053  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01841**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 392.00  
**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 719 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. JOHN FAISSLER</b>		Date of Receipt
Mailing Address 329 SHORE RUSH DRIVE		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
PAWLEYS ISLAND	SC	29585-6481
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI01842</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MS. RUTH ELLEN FAKLIS</b>		Date of Receipt
Mailing Address 7949 CAMBRIDGE DRIVE		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
ORLAND PARK	IL	60462-2900
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI01843</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1500.00"/>
Name of Employer	Occupation	
PRAIRIE TRAILS PUBLIC LIBRARY DISTRICT	PUBLIC LIBRARY DIRECTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. DR. FRANK FALERO</b>		Date of Receipt
Mailing Address P.O. BOX 950		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
SPRINGVILLE	CA	93265-0950
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI01844</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="140.00"/>
Name of Employer	Occupation	
C.S.U.	PROFESSOR EMERITUS ECONOMICS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="280.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1890.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 720 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JAMES S. FANT**

Mailing Address 8980 LAKE VIEW DRIVE

City State Zip Code  
FAIRHOPE AL 36532-6977

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01845**

Amount of Each Receipt this Period  
136.00

Full Name (Last, First, Middle Initial)  
**B. MRS. ADEL Y. FARAG**

Mailing Address 7166 E. BERNEIL LANE

City State Zip Code  
PARADISE VALLEY AZ 85253-1972

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01846**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MR. JONATHAN FARKAS**

Mailing Address 52 E. 72ND STREET  
8TH FLOOR

City State Zip Code  
NEW YORK NY 10021-4266

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01847**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1636.00

**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 721 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL B. FARLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1417 HILLSIDE DRIVE  
 City State Zip Code  
 CHERRY HILL NJ 08003-3501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LOCKTON QUANTITATIVE ANALYST  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01848**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. VIOLET FARM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7600 GOLDEN VALLEY ROAD  
 APARTMENT 305  
 City State Zip Code  
 MINNEAPOLIS MN 55427-4558  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01849**  
 Amount of Each Receipt this Period  
 55.00

**C. MR. JEFFREY FARRAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 WOODCREST COURT  
 City State Zip Code  
 SOUTHLAKE TX 76092-7233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 JABIL CIRCUIT, INC. BUSINESS UNIT DIRECTOR  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01850**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 805.00  
**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 722 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. REAR ADMIR EUGENE H. FARRELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23 AVALON PARK  
 City SAN ANTONIO State TX Zip Code 78257-1308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01851**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. JAMES FARRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5320 LOOP 205 APARTMENT 106  
 City TEMPLE State TX Zip Code 76502-4098  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01852**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. JAMES FARRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5320 LOOP 205 APARTMENT 106  
 City TEMPLE State TX Zip Code 76502-4098  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01853**  
 Amount of Each Receipt this Period  
 26.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	126.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 723 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. JAY FARRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7979 E PRINCESS DR  
 UNIT 26  
 City SCOTTSDALE State AZ Zip Code 85255-5880  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INNOVATIVE THERAPIES Occupation VICE PRESIDENT OF SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01854**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. MARK FASMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 115 AYERS COURT  
 APARTMENT N3  
 City TEANECK State NJ Zip Code 07666-5155  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WORLDWIDE INDUSTRIAL CONSULTANTS, INC. Occupation C.A.D. OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01855**  
 Amount of Each Receipt this Period  
 75.00

**C. MR. MARK FASMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 115 AYERS COURT  
 APARTMENT N3  
 City TEANECK State NJ Zip Code 07666-5155  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WORLDWIDE INDUSTRIAL CONSULTANTS, II Occupation C.A.D. OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01856**  
 Amount of Each Receipt this Period  
 76.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	401.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 724 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID FASSNACHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 916 LINCOLN HEIGHTS AVENUE  
 City EPHRATA State PA Zip Code 17522-1542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WELLINGTON MANAGEMENT Occupation INVESTMENT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01857**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. HARRY FAUGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 VALLEY DRIVE  
 City WEAVERVILLE State NC Zip Code 28787-8908  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01858**  
 Amount of Each Receipt this Period  
 120.00

**C. DR. JAMES FAULKNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21 REGENT WOOD ROAD  
 City NORTHFIELD State IL Zip Code 60093-2728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation M. D.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01859**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1220.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 725 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. JAMES FAULKNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21 REGENT WOOD ROAD  
 City NORTHFIELD State IL Zip Code 60093-2728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation M. D.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01860**  
 Amount of Each Receipt this Period  
 101.00

**B. MR. HENRI MORTIMER FAVROT JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1400 STATE STREET  
 City NEW ORLEANS State LA Zip Code 70118-6047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ARCHITECT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2101.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01861**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. JOHN THOMAS FAWCETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 719 10TH STREET NE  
 City WASHINGTON State DC Zip Code 20002-3733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01862**  
 Amount of Each Receipt this Period  
 225.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	327.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 726 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CHRISTINE M. FEDELIM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7251 PEPPERTREE CIRCLE S.  
 City DAVIE State FL Zip Code 33314-6921  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01863**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. RAYMOND PAUL FEDERAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8150 CARRIAGE LANE  
 City STANWOOD State MI Zip Code 49346-9212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI01864**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. RAYMOND PAUL FEDERAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8150 CARRIAGE LANE  
 City STANWOOD State MI Zip Code 49346-9212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01865**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 727 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RAYMOND PAUL FEDERAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8150 CARRIAGE LANE  
 City STANWOOD State MI Zip Code 49346-9212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01866**  
 Amount of Each Receipt this Period  
 51.00

**B. MR. ERNIE W. FEDERER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 67 COZUMEL PLACE  
 City SIMI VALLEY State CA Zip Code 93065-4039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation MENTAL HEALTH PROFESSIONAL  
 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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01867**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. FABIAN JOSEPH FEDERICO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 274 DEER RUN DRIVE SOUTH  
 City PONTE VEDRA BEACH State FL Zip Code 32082-3507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01868**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	251.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 728 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JOY A. FEEKEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1011 PARKER STREET  
 City CAMBRIDGE State NE Zip Code 69022-3556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01869**  
 Amount of Each Receipt this Period  
 66.00

**B. MR. MARTIN P. FEENEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8 ORCHARD DRIVE  
 City RANDOLPH State NJ Zip Code 07869-2722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01870**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. MARLIN L. FEGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 119 ROUTE 204 APARTMENT 22B  
 City SELINGROVE State PA Zip Code 17870-1342  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01871**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 367.00  
**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 729 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. THEODORA FELDBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 9175  
 City State Zip Code  
 FRAMINGHAM MA 01701-9175  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01872**  
 Amount of Each Receipt this Period  
 2000.00

**B. DR. MARC FELDMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12 LAMBERT JOHNSON DRIVE  
 City State Zip Code  
 OCEAN NJ 07712-3723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 C.J.O.M.S. ORAL SURGEON  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01873**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. PHILIP T. FELDSINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5525 S. FLONTENAC STREET  
 City State Zip Code  
 SEATTLE WA 98118-3433  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BIO CONTROL SYSTEMS GENERAL MANAGER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01874**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2350.00  
**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 730 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY ANN FELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 106 S. 190 E.  
 City VALPARAISO State IN Zip Code 46383-7878  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01875**  
 Amount of Each Receipt this Period  
 60.00

**B. MRS. MARY ANN FELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 106 S. 190 E.  
 City VALPARAISO State IN Zip Code 46383-7878  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01876**  
 Amount of Each Receipt this Period  
 1.00

**C. MRS. MARY ANN FELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 106 S. 190 E.  
 City VALPARAISO State IN Zip Code 46383-7878  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01877**  
 Amount of Each Receipt this Period  
 60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 121.00  
**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 731 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. DAVID F. FELSBURG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 3778  
 City PLANT CITY State FL Zip Code 33563-0013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01878**  
 Amount of Each Receipt this Period  
 100.00

**B. DR. DAVID F. FELSBURG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 3778  
 City PLANT CITY State FL Zip Code 33563-0013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01879**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. DIANE FELSCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1415 HOPI CIRCLE  
 City SAINT GEORGE State UT Zip Code 84790-7677  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01880**  
 Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 235.00  
**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 732 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. DIANE FELSCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1415 HOPI CIRCLE

City SAINT GEORGE	State UT	Zip Code 84790-7677
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01881**

Amount of Each Receipt this Period  
 120.00

**B. MS. DIANE FELSCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1415 HOPI CIRCLE

City SAINT GEORGE	State UT	Zip Code 84790-7677
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01882**

Amount of Each Receipt this Period  
 31.00

**C. MR. EARL FELTNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10526 CORY LAKE DRIVE

City TAMPA	State FL	Zip Code 33647-2710
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01883**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	251.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 733 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. EARL FELTNER**

Mailing Address 10526 CORY LAKE DRIVE

City TAMPA State FL Zip Code 33647-2710

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01884**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. EARL FELTNER**

Mailing Address 10526 CORY LAKE DRIVE

City TAMPA State FL Zip Code 33647-2710

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01885**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**C. MR. DON ANTONIO FENDON**

Mailing Address 310 W. COUNTRY GABLES DRIVE

City PHOENIX State AZ Zip Code 85023-5241

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01886**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 351.00

**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 734 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CHAROLYN FERGUSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6841 VIRGINIA PARKWAY #103  
 P.M.B. 453  
 City MC KINNEY State TX Zip Code 75071-5716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01887**  
 Amount of Each Receipt this Period  
 300.00  
 Aggregate Year-to-Date ▼  
 300.00

**B. MR. CURT A. FERGUSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX1734  
 City ATLANTA State GA Zip Code 30301-1734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ATLANTIC INDUSTRIES Occupation MANAGEMENT  
 Receipt For:  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01888**  
 Amount of Each Receipt this Period  
 500.00  
 Aggregate Year-to-Date ▼  
 1000.00

**C. MS. DEBRA FERGUSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1348 FORDYCE DRIVE  
 City CHESAPEAKE State VA Zip Code 23322-4321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ADVANCE TITLE & ABSTRACT, INC. Occupation VICE PRESIDENT  
 Receipt For:  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01889**  
 Amount of Each Receipt this Period  
 116.00  
 Aggregate Year-to-Date ▼  
 366.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	916.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 735 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FREDRICK FERGUSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5464 GEOFFREY AVENUE  
 City State Zip Code  
 SIMI VALLEY CA 93063-4123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 301.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01890**  
 Amount of Each Receipt this Period  
 101.00

**B. MR. HUGH W. FERGUSON III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4125 SOUTHWESTERN BLVD.  
 City State Zip Code  
 DALLAS TX 75225-6763  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE ATTORNEY  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01891**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. HUGH W. FERGUSON III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4125 SOUTHWESTERN BLVD.  
 City State Zip Code  
 DALLAS TX 75225-6763  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE ATTORNEY  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01892**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 321.00  
**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 736 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD FERGUSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 7202 MOJAVE STREET

City DUBLIN State OH Zip Code 43017-2895

FEC ID number of contributing federal political committee. **C**

Name of Employer STATE OF OHIO Occupation LAWYER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01893**

Amount of Each Receipt this Period  
 1.00

**B. MR. WILLIAM WAYNE FERGUSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 14590 FM 317

City BROWNSBORO State TX Zip Code 75756-7451

FEC ID number of contributing federal political committee. **C**

Name of Employer CENTURY 21 JUDGE FITE MANAGEMENT CO Occupation REALTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01894**

Amount of Each Receipt this Period  
 250.00

**C. MR. FRED FERN**  
Full Name (Last, First, Middle Initial)

Mailing Address 50023 RIDGE VIEW WAY

City PALM DESERT State CA Zip Code 92260-6779

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTMENT ADVISOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01895**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	351.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 737 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ADELA FERNANDEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5334 ALTON ROAD  
 City MIAMI BEACH State FL Zip Code 33140-2015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01896**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. ADELA FERNANDEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5334 ALTON ROAD  
 City MIAMI BEACH State FL Zip Code 33140-2015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01897**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. ADELA FERNANDEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5334 ALTON ROAD  
 City MIAMI BEACH State FL Zip Code 33140-2015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01898**  
 Amount of Each Receipt this Period  
 100.00

**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: PAGE 738 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CHRISTINA FERNANDEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7341 MILLER DRIVE  
 City MIAMI State FL Zip Code 33155-5503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ARROWMAIL PRESORT COMPANY, INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01899**  
 Amount of Each Receipt this Period  
 275.00

**B. MR. RALPH A. FERRARO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7422 BRIDGER CANYON ROAD  
 City BOZEMAN State MT Zip Code 59715-8716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01900**  
 Amount of Each Receipt this Period  
 220.00

**C. MR. ALDO FERRETTI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5215 W. CEDAR LANE  
 City BETHESDA State MD Zip Code 20814-1548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI01901**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 595.00  
**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 739 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. WANDA FERRIER</b>		Date of Receipt
Mailing Address 5423 LOCH NESS TERRACE		M M M / D D D / Y Y Y Y Y Y 03 / 19 / 2014
City	State	Zip Code
SALISBURY	MD	21801-2330
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI01902</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		135.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	270.00	

Full Name (Last, First, Middle Initial) <b>B. MR. DOUGLAS FERRIS</b>		Date of Receipt
Mailing Address 4010 PILOT DR STE 103		M M M / D D D / Y Y Y Y Y Y 03 / 04 / 2014
City	State	Zip Code
MEMPHIS	TN	38118-6916
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI01903</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	500.00	

Full Name (Last, First, Middle Initial) <b>C. MR. G. MICHAEL FERRIS</b>		Date of Receipt
Mailing Address 2264 HIGHWAY 6 & 50		M M M / D D D / Y Y Y Y Y Y 03 / 05 / 2014
City	State	Zip Code
GRAND JUNCTION	CO	81505-9410
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI01904</b>
Name of Employer SELF-EMPLOYED		Amount of Each Receipt this Period
Occupation BUSINESS MANAGER		500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1135.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 740 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MARION FERSING**

Mailing Address P.O. BOX 801

City State Zip Code  
PORT ARANSAS TX 78373-0801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1414.13

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01905**

Amount of Each Receipt this Period  
714.00

Full Name (Last, First, Middle Initial)  
**B. MS. JUANITA FIDLER**

Mailing Address 609 W. 15TH STREET

City State Zip Code  
ADA OK 74820-6258

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01906**

Amount of Each Receipt this Period  
70.00

Full Name (Last, First, Middle Initial)  
**C. MS. JUANITA FIDLER**

Mailing Address 609 W. 15TH STREET

City State Zip Code  
ADA OK 74820-6258

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01907**

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 794.00

**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 741 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ANDREW FIEDLER**

Mailing Address **6332 WESTCHESTER**

City **HOUSTON**      State **TX**      Zip Code **77005-3330**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **BP**      Occupation **MANAGEMENT**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**03 / 07 / 2014**  
**Transaction ID : 2014M04L11AI01908**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT C. FIELDS**

Mailing Address **11170 MAPLE KNOLL TER  
UNIT L218**

City **CINCINNATI**      State **OH**      Zip Code **45246-4154**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1106.00**

Date of Receipt  
**03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI01909**

Amount of Each Receipt this Period  
**1.00**

Full Name (Last, First, Middle Initial)  
**C. MR. LESTER FILION**

Mailing Address **9250 20TH AVENUE N. W.**

City **SEATTLE**      State **WA**      Zip Code **98117-2701**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
**03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI01910**

Amount of Each Receipt this Period  
**300.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **551.00**

**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 742 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LORRAINE H. FINCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 701 N. MONTGOMERY STREET  
 City State Zip Code  
 OJAI CA 93023-1844  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01911**  
 Amount of Each Receipt this Period  
 1.00

**B. DR. MARTHA FINCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3176 N. KATHERINE AVENUE  
 City State Zip Code  
 FAYETTEVILLE AR 72703-6519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ALLERGY CARE CENTER PHYSICIAN  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01912**  
 Amount of Each Receipt this Period  
 600.00

**C. MS. WINIFRED FINEHOUT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 87 ROCKINGCHAIR ROAD  
 City State Zip Code  
 WHITE PLAINS NY 10607-1729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01913**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 721.00  
**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 743 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. WINIFRED FINEHOUT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 87 ROCKINGCHAIR ROAD  
 City State Zip Code  
 WHITE PLAINS NY 10607-1729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01914**  
 Amount of Each Receipt this Period  
 100.00

**B. RAYMOND FINK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 134  
 City State Zip Code  
 LANSING MI 48895-0134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 330.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01915**  
 Amount of Each Receipt this Period  
 50.00

**C. DR. RICHARD S. FINLAYSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10902 ROCKY TRAIL  
 City State Zip Code  
 SAN ANTONIO TX 78249-4133  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 UTAH HEALTH SCIENCE CENTER DENTIST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01916**  
 Amount of Each Receipt this Period  
 100.00

**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 744 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL J. FINNIGAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 8217 MASON AVENUE  
UNIT B.

City WINNETKA State CA Zip Code 91306-1859

FEC ID number of contributing federal political committee. **C**

Name of Employer LOS ANGELES D.W.P. Occupation PILOT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
03 / 10 / 2014  
Transaction ID : 2014M04L11AI01917

Amount of Each Receipt this Period  
55.00

**B. MR. MICHAEL J. FINNIGAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 8217 MASON AVENUE  
UNIT B.

City WINNETKA State CA Zip Code 91306-1859

FEC ID number of contributing federal political committee. **C**

Name of Employer LOS ANGELES D.W.P. Occupation PILOT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
03 / 26 / 2014  
Transaction ID : 2014M04L11AI01918

Amount of Each Receipt this Period  
85.00

**C. MR. ALBERT FIRCHAU**  
Full Name (Last, First, Middle Initial)

Mailing Address 390 HAUSER BLVD.  
APARTMENT 4F

City LOS ANGELES State CA Zip Code 90036-5574

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 286.00

Date of Receipt  
03 / 24 / 2014  
Transaction ID : 2014M04L11AI01919

Amount of Each Receipt this Period  
251.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 391.00

**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 745 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. BRIAN G. FIRTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1497 BROOKFIELD RD  
 City YARDLEY State PA Zip Code 19067-3931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI01920**  
 Amount of Each Receipt this Period  
 50.00

**B. DR. BRIAN G. FIRTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1497 BROOKFIELD RD  
 City YARDLEY State PA Zip Code 19067-3931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01921**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. MARY T. FIRTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6419 BROOKSIDE DRIVE  
 City CHEVY CHASE State MD Zip Code 20815-6648  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI01922**  
 Amount of Each Receipt this Period  
 201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 301.00  
**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 746 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MIRIAM L. FISCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 601 BREEZE VIEW LANE  
 City SAINT CHARLES State MO Zip Code 63304-9122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01923**  
 Amount of Each Receipt this Period 55.00

**B. JAMES FISH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11826 BAYHURST DR.  
 City HOUSTON State TX Zip Code 77024-6312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WASTE MANAGEMENT Occupation FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01924**  
 Amount of Each Receipt this Period 500.00

**C. MRS. LORNA M. FISH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 E. PICKERING BEND  
 City RICHBORO State PA Zip Code 18954-1540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01925**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 755.00  
**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 747 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ALAN S. FISHER**

Mailing Address 117 ANNAPOLIS LANE

City State Zip Code  
PONTE VEDRA FL 32082-1512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01926**

Amount of Each Receipt this Period  
2000.00

Full Name (Last, First, Middle Initial)  
**B. COLONEL LOWELL B. FISHER**

Mailing Address 7050 NIGHT HAWK PLACE

City State Zip Code  
COLORADO SPRINGS CO 80919-1412

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01927**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MR. ROBERT D. FISHER**

Mailing Address 727 S. FLORIDA AVENUE

City State Zip Code  
DELAND FL 32720-6825

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01928**

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2120.00

**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 748 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SUSAN FISHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14530 S. COMMERCIAL STREET  
 City BLYTHE State CA Zip Code 92225-2755  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FISHER WIRELESS SERVICES Occupation RADIO SERVICE PROVIDER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01929**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. SUSHILA KAUL FISHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6033 CHESTERBROOK ROAD  
 City MCLEAN State VA Zip Code 22101-3213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01930**  
 Amount of Each Receipt this Period  
 750.00

**C. MR. ZACHARY FISHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 312 N HEDGE ST  
 City TAYLORVILLE State IL Zip Code 62568-7854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01931**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 749 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TERRY MICHAEL FISTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3128 WARRENWOOD WYND  
 City LEXINGTON State KY Zip Code 40502-3511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FISTER INC. Occupation C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01932**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. CAITLIN D. FITTE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2699 BRISAM STREET, NE  
 City GRAND RAPIDS State MI Zip Code 49525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation REQUESTED  
 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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01932**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. LAWRENCE B. FITZGERALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3164 WITHERS AVENUE  
 City LAFAYETTE State CA Zip Code 94549-2020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01934**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 750 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LAWRENCE B. FITZGERALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3164 WITHERS AVENUE  
 City LAFAYETTE State CA Zip Code 94549-2020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01935**  
 Amount of Each Receipt this Period 250.00

**B. MR. JOSEPH FITZSIMMONS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 N. MAIN STREET APARTMENT 1005  
 City ANN ARBOR State MI Zip Code 48104-1475  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01936**  
 Amount of Each Receipt this Period 250.00

**C. MR. TIMOTHY FITZSIMONS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 149 SHELLEY LANE  
 City WHEATON State IL Zip Code 60189-7423  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01937**  
 Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1500.00  
**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 751 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JEFFREY FITZWILLIAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7297 ROYALGREEN DRIVE  
 City CINCINNATI State OH Zip Code 45244-3650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01938**  
 Amount of Each Receipt this Period  
 1000.00

**B. MRS. LINDA WARD FIZHUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2635 GOLFSIDE COURT  
 City NAPLES State FL Zip Code 34110-8675  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI01939**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JOHN FLAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3939 SUMAC CIRCLE  
 City MIDDLETON State WI Zip Code 53562-2305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FLAD DEVELOPMENT Occupation REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01940**  
 Amount of Each Receipt this Period  
 375.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1475.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 752 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DANIEL J. FLAKE**  
Full Name (Last, First, Middle Initial)

Mailing Address 3002 TARA LANE

City NORMAN State OK Zip Code 73069-8302

FEC ID number of contributing federal political committee. **C**

Name of Employer MURPHY OIL, U.S.A. Occupation ENGINEERING MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01941**

Amount of Each Receipt this Period  
 250.00

**B. MR. LAWRENCE J. FLEIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 9550 CONSERVATION STREET N.E.

City ADA State MI Zip Code 49301-9752

FEC ID number of contributing federal political committee. **C**

Name of Employer FUELS & VANDENBRINK ENGINEERIN Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI01942**

Amount of Each Receipt this Period  
 110.00

**C. MS. LOUISE FLENTYE**  
Full Name (Last, First, Middle Initial)

Mailing Address 8515 COSTA VERDE BLVD.  
UNIT 1805

City SAN DIEGO State CA Zip Code 92122-1148

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

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  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01943**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 410.00

**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 753 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ARTHUR E. FLINT**

Mailing Address 4572 MCKAY STREET

City NORTH PORT      State FL      Zip Code 34286-7244

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01944**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**B. MR. ARTHUR E. FLINT**

Mailing Address 4572 MCKAY STREET

City NORTH PORT      State FL      Zip Code 34286-7244

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01945**

Amount of Each Receipt this Period  
56.00

Full Name (Last, First, Middle Initial)  
**C. MR. RUSSELL F. FLINT**

Mailing Address 224 REDWOOD DRIVE

City NEW ALBANY      State IN      Zip Code 47150-4381

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
431.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01946**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 226.00

**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 754 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. RUSSELL F. FLINT**

Mailing Address 224 REDWOOD DRIVE

City State Zip Code  
NEW ALBANY IN 47150-4381

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
431.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI01947**

Amount of Each Receipt this Period  
31.00

Full Name (Last, First, Middle Initial)  
**B. MRS. FRANCES KAY FLOGAUS-DAILEY**

Mailing Address 6520 LAKESHORE STREET

City State Zip Code  
WEST BLOOMFIELD MI 48323-1429

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01948**

Amount of Each Receipt this Period  
220.00

Full Name (Last, First, Middle Initial)  
**C. MRS. DIANA FLOOD**

Mailing Address 19249 HIGHWAY 20

City State Zip Code  
PICABO ID 83348-5000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01949**

Amount of Each Receipt this Period  
110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 361.00

**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 755 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DIANA FLOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19249 HIGHWAY 20  
 City PICABO State ID Zip Code 83348-5000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01950**  
 Amount of Each Receipt this Period  
**100.00**

**B. MR. RONALD R. FLORES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2851 FALCON DRIVE  
 City MADERA State CA Zip Code 93637-9287  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FLORESTONE PRODUCTS COMPANY Occupation MANAGER  
 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  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01951**  
 Amount of Each Receipt this Period  
**300.00**

**C. MR. PHILIP FLORIO JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 514 OAK CREST DRIVE  
 City OSHKOSH State WI Zip Code 54904-9282  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **203.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01952**  
 Amount of Each Receipt this Period  
**103.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>503.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 756 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. WARREN F. FLORKIEWICZ</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014 <b>Transaction ID : 2014M04L11AI01953</b>
Mailing Address 9760 E. PINNACLE VISTA DRIVE		Amount of Each Receipt this Period 100.00
City SCOTTSDALE	State AZ	
Zip Code 85262-8431		Aggregate Year-to-Date ▼ 900.00
FEC ID number of contributing federal political committee. C		
Name of Employer FOAM FABRICATORS, INC.	Occupation CHIEF EXECUTIVE OFFICER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. DR. KENNETH M. FLORY</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2014 <b>Transaction ID : 2014M04L11AI01954</b>
Mailing Address 1200 MONTCLAIR STREET		Amount of Each Receipt this Period 1000.00
City LONGVIEW	State TX	
Zip Code 75601-3564		Aggregate Year-to-Date ▼ 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer INTERNAL MEDICINE ASSOCIATION	Occupation DOCTOR	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. MR. THOMPSON RALPH FLOWE</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI01955</b>
Mailing Address 2317 DIAMOND POINTE DRIVE SE		Amount of Each Receipt this Period 1000.00
City DECATUR	State AL	
Zip Code 35603-5237		Aggregate Year-to-Date ▼ 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 757 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. J. THOMAS FLY SR.</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI01956</b>
Mailing Address 1553 MEADOW CIRCLE		Amount of Each Receipt this Period 120.00
City CARPINTERIA	State CA	Zip Code 93013-1760
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) <b>B. MS. PATRICIA A. FLYNN</b>		Date of Receipt MM / DD / YYYY 03 / 04 / 2014 <b>Transaction ID : 2014M04L11AI01957</b>
Mailing Address 54 CONYINGHAM AVENUE		Amount of Each Receipt this Period 120.00
City STATEN ISLAND	State NY	Zip Code 10301-2011
FEC ID number of contributing federal political committee. C		
Name of Employer MANDARIN ORIENTAL HOTEL GROUP	Occupation RESIDENTIAL CONCIERGE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.00	

Full Name (Last, First, Middle Initial) <b>C. MS. PATRICIA A. FLYNN</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI01958</b>
Mailing Address 54 CONYINGHAM AVENUE		Amount of Each Receipt this Period 110.00
City STATEN ISLAND	State NY	Zip Code 10301-2011
FEC ID number of contributing federal political committee. C		
Name of Employer MANDARIN ORIENTAL HOTEL GROUP	Occupation RESIDENTIAL CONCIERGE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 758 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. PATRICIA A. FLYNN</b>		Date of Receipt
Mailing Address 54 CONYINGHAM AVENUE		M M M / D D D / Y Y Y Y Y Y 03 / 25 / 2014
City State Zip Code STATEN ISLAND NY 10301-2011		<b>Transaction ID : 2014M04L11AI01959</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1.00
Name of Employer MANDARIN ORIENTAL HOTEL GROUP	Occupation RESIDENTIAL CONCIERGE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.00	

Full Name (Last, First, Middle Initial) <b>B. BG. RONALD B. FLYNN C.N.C. (RE</b>		Date of Receipt
Mailing Address 30906 CALLE BARBOSA		M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2014
City State Zip Code LAGUNA NIGUEL CA 92677-5508		<b>Transaction ID : 2014M04L11AI01960</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) <b>C. W. D. FLYNN</b>		Date of Receipt
Mailing Address 345 COUNTY ROAD 928		M M M / D D D / Y Y Y Y Y Y 03 / 04 / 2014
City State Zip Code DELTA AL 36258-8973		<b>Transaction ID : 2014M04L11AI01961</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 120.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	621.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 759 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. W. D. FLYNN**

Mailing Address 345 COUNTY ROAD 928

City DELTA	State AL	Zip Code 36258-8973
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2014

**Transaction ID : 2014M04L11AI01962**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**B. MRS. JANE FOGARTY**

Mailing Address 450 MUDD CREEK ROAD

City INMAN	State SC	Zip Code 29349-8175
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2014

**Transaction ID : 2014M04L11AI01963**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. MR. JOHN T. FOGARTY**

Mailing Address 2918 NORTH OCEAN BLVD.

City GULF STREAM	State FL	Zip Code 33483-7349
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : 2014M04L11AI01964**

Amount of Each Receipt this Period  
240.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	690.00
<b>TOTAL</b> This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 760 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN FOLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 10761 HOLLOW BAY TERRACE

City WEST PALM BEACH State FL Zip Code 33412-3034

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1051.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01965**

Amount of Each Receipt this Period  
 50.00

**B. MR. JOHN FOLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 10761 HOLLOW BAY TERRACE

City WEST PALM BEACH State FL Zip Code 33412-3034

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1051.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01966**

Amount of Each Receipt this Period  
 1001.00

**C. DR. KIM FOLLOWWILL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1065 WESTPARK AVENUE

City VICTORIA State TX Zip Code 77905-3762

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

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  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI01967**

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1351.00

**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 761 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JUDITH ANN FOLSE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20731 SEA PINE DRIVE  
 City KATY State TX Zip Code 77450-4236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DEPARTMENT OF THE TREASURY Occupation SUPERVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01968**  
 Amount of Each Receipt this Period  
 50.00

**B. MS. JUDITH ANN FOLSE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20731 SEA PINE DRIVE  
 City KATY State TX Zip Code 77450-4236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DEPARTMENT OF THE TREASURY Occupation SUPERVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01969**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. BETTY FOLTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2780 PARIS AVENUE S.E.  
 City PARIS State OH Zip Code 44669-9730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01970**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00  
**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 762 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. ALLEN FONG**

Mailing Address 19609 VERSAILLES WAY

City SARATOGA	State CA	Zip Code 95070-5512
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01971**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. MR. HECTOR RENE FONSECA**

Mailing Address 7002 LARRLYN DRIVE

City SPRINGFIELD	State VA	Zip Code 22151-3314
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation REALTOR
-----------------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01972**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**C. MR. HECTOR RENE FONSECA**

Mailing Address 7002 LARRLYN DRIVE

City SPRINGFIELD	State VA	Zip Code 22151-3314
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation REALTOR
-----------------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01973**

Amount of Each Receipt this Period  
101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	521.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 763 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ELDON FORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 LALITA LANE  
 City SANTA BARBARA State CA Zip Code 93105-1916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01974**  
 Amount of Each Receipt this Period  
 725.00

**B. MR. HORATIO FORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 111 W 3RD ST  
 City ROSWELL State NM Zip Code 88201-4783  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1315.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI01975**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. PHILIP D. FORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8206 SILK TREE WAY  
 City ANTELOPE State CA Zip Code 95843-4000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KAISER Occupation PHYSICIAN ASSISTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01976**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1925.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 764 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TRUXTON K. FORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2057 GNAHN STREET  
 City BURLINGTON State IA Zip Code 52601-4408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01977**  
 Amount of Each Receipt this Period 100.00

**B. MRS. MARGARET S. FORDYCE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12401 N. 22ND STREET APARTMENT G104  
 City TAMPA State FL Zip Code 33612-4640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01978**  
 Amount of Each Receipt this Period 101.00

**C. MR. MERLIN FORESMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 103 N. QUINCY STREET  
 City HEBRON State IN Zip Code 46341-8753  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01979**  
 Amount of Each Receipt this Period 110.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 311.00  
**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 765 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MSGT. GIVENS B. FORSYTHE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 1448  
 City LYTLE State TX Zip Code 78052-1448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI01980**  
 Amount of Each Receipt this Period  
 150.00

**B. MR. WALLACE R. FORT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 391 DUTTON MOUNTAIN ROAD  
 City CENTER RIDGE State AR Zip Code 72027-8463  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01981**  
 Amount of Each Receipt this Period  
 240.00

**C. MR. WALLACE R. FORT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 391 DUTTON MOUNTAIN ROAD  
 City CENTER RIDGE State AR Zip Code 72027-8463  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01982**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 410.00  
**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 766 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARK FORTNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12937 N.E. MORRIS STREET  
 City PORTLAND State OR Zip Code 97230-1734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE OF OREGON Occupation INSTRUCTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI01983**  
 Amount of Each Receipt this Period  
 750.00

**B. MS. DOROTHY FORTNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 105 MEADOWBROOK DRIVE  
 City BATAVIA State OH Zip Code 45103-1717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01984**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. THOMAS A. FOSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8751 PARKWAY DRIVE  
 City HIGHLAND State IN Zip Code 46322-1519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01985**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1001.00  
**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 767 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARION L. FOSSLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 141 DAN MOODY TRAIL  
 City GEORGETOWN State TX Zip Code 78633-4545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI01986**  
 Amount of Each Receipt this Period 50.00

**B. MR. ALBERT W. FOSTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20451 AUDETTE STREET  
 City DEARBORN State MI Zip Code 48124-3907  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01987**  
 Amount of Each Receipt this Period 101.00

**C. MR. CHICK FOSTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1010 SHERWOOD LANE  
 City CAMDEN State SC Zip Code 29020-3933  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI01988**  
 Amount of Each Receipt this Period 125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 276.00  
**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 768 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PAM FOURNIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2102 SERENITY WAY  
 City State Zip Code  
 COMMERCE TOWNSHIP MI 48390-1837  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 XEROX BUSINESS SERVICES L.L.C. VICE PRESIDENT - CONTRACT ADMINISTRATIVE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01989**  
 Amount of Each Receipt this Period  
 1000.00

**B. DR. ROBERT FOUST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 322 W. PICCADILLY STREET  
 City State Zip Code  
 WINCHESTER VA 22601-3908  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 WINCHESTER RADIOLOGIST, P.C. PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01990**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. DAVID FOWLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 908 VALLEYVIEW DRIVE  
 City State Zip Code  
 WESTERVILLE OH 43081-3269  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01991**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1240.00  
**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 769 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID FOWLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 908 VALLEYVIEW DRIVE  
 City WESTERVILLE State OH Zip Code 43081-3269  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI01992**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. DAVID J. FOWLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1015 MALLARDS WAY  
 City O FALLON State MO Zip Code 63368-9662  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EM SOLUTIONS INC Occupation RADAR ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI01993**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. THOMAS R. FOWLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 306 OVERLOOK DRIVE  
 City KERRVILLE State TX Zip Code 78028-6028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI01994**  
 Amount of Each Receipt this Period  
 70.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	420.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 770 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. BRIAN FOX**

Mailing Address 4438 ASHBERRY DRIVE

City Milton State WI Zip Code 53563-8897

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI01995**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MRS. DOROTHY D. FOX**

Mailing Address 603 CLIFF VIEW COURT

City Rockwall State TX Zip Code 75087-5394

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI01996**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MRS. DOROTHY D. FOX**

Mailing Address 603 CLIFF VIEW COURT

City Rockwall State TX Zip Code 75087-5394

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI01997**

Amount of Each Receipt this Period  
50.00

**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: PAGE 771 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DOROTHY D. FOX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 603 CLIFF VIEW COURT  
 City State Zip Code  
 ROCKWALL TX 75087-5394  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI01998**  
 Amount of Each Receipt this Period  
 51.00

**B. JOHN F. FOX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27461 TRAVELERS REST CT.  
 City State Zip Code  
 EASTON MD 21601-7629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI01999**  
 Amount of Each Receipt this Period  
 250.00

**C. DR. FRANK L. FRABLE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 412 SUNNYSIDE AVENUE  
 City State Zip Code  
 AURORA IN 47001-1526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02000**  
 Amount of Each Receipt this Period  
 501.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 802.00  
**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 773 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ADELINE A. FRANK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9701 OLD HYDE PARK PLACE  
 City BRADENTON State FL Zip Code 34202-4096  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02004**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. MANFRED FRANKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9814 71ST AVENUE  
 City FOREST HILLS State NY Zip Code 11375-5903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 551.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02005**  
 Amount of Each Receipt this Period  
 276.00

**C. MR. PHILIP E. FRANKFORT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 104 GRAY FOX LANE  
 City FRANKLIN State VA Zip Code 23851-2741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02006**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 376.00  
**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 774 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PHILIP E. FRANKFORT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 104 GRAY FOX LANE  
 City FRANKLIN State VA Zip Code 23851-2741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02007**  
 Amount of Each Receipt this Period 1.00

**B. MR. EDWARD W. FRANKLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 275 CENTRAL PARK WEST #19B  
 City NEW YORK State NY Zip Code 10024-3058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02008**  
 Amount of Each Receipt this Period 1000.00

**C. MR. EDWARD W. FRANKLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 275 CENTRAL PARK WEST #19B  
 City NEW YORK State NY Zip Code 10024-3058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02009**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1201.00  
**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 775 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE O. FRANKLIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 225 PARKING WAY STREET

City LAKE JACKSON State TX Zip Code 77566-5226

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02010**

Amount of Each Receipt this Period  
 250.00

**B. DR. JAMES S. FRANKLIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 314 WATERMARK DR

City PEACHTREE CITY State GA Zip Code 30269-6649

FEC ID number of contributing federal political committee. **C**

Name of Employer NORTH ATLANTA SURGICAL Occupation SURGEON

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02011**

Amount of Each Receipt this Period  
 50.00

**C. MR. ANDREW FRANKO**  
Full Name (Last, First, Middle Initial)

Mailing Address 4061 CONFERENCE RD

City BELLBROOK State OH Zip Code 45305-8915

FEC ID number of contributing federal political committee. **C**

Name of Employer FLUID QUIP INC Occupation PRESIDENT

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  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02012**

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

**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 776 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. ALTA V. FRANKS</b>		Date of Receipt
Mailing Address 3700 OLD MOORINGSPOUR ROAD		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
SHREVEPORT	LA	71107-3216
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI02013</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="10000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="10000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. JAMES FRASER</b>		Date of Receipt
Mailing Address 26455 S. TAMIAMI TRAIL SUITE 5202		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
BONITA SPRINGS	FL	34134-7842
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI02014</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="1.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="501.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. BOB FRAZER</b>		Date of Receipt
Mailing Address 4746 HILLSBORO CIRCLE		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
SANTA ROSA	CA	95405-8784
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI02015</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="120.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="221.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="10121.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 777 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BOB FRAZER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4746 HILLSBORO CIRCLE  
 City SANTA ROSA State CA Zip Code 95405-8784  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02016**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. RONALD FRAZIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4114 STATE HIGHWAY 206  
 City BAINBRIDGE State NY Zip Code 13733-3203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02017**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JERALD LEE FREAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8658 PATTY BERG COURT  
 City FORT MYERS State FL Zip Code 33919-7054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02018**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 778 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JERALD LEE FREAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8658 PATTY BERG COURT  
 City State Zip Code  
 FORT MYERS FL 33919-7054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02019**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. JERALD LEE FREAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8658 PATTY BERG COURT  
 City State Zip Code  
 FORT MYERS FL 33919-7054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02020**  
 Amount of Each Receipt this Period  
 20.00

**C. MS. ANNA A. FREDIANI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1517 DAISY DRIVE  
 City State Zip Code  
 PATTERSON CA 95363-8362  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02021**  
 Amount of Each Receipt this Period  
 65.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 135.00  
**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 779 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ANNA A. FREDIANI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1517 DAISY DRIVE  
 City Patterson State CA Zip Code 95363-8362  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02022**  
 Amount of Each Receipt this Period 60.00

**B. MS. ANNA A. FREDIANI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1517 DAISY DRIVE  
 City Patterson State CA Zip Code 95363-8362  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02023**  
 Amount of Each Receipt this Period 65.00

**C. MR. THOMAS ANTHONY FREDRICKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 290  
 City WOODWORTH State LA Zip Code 71485-0290  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FEDERAL BUREAU OF PRISONS Occupation CORRECTIONAL OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02024**  
 Amount of Each Receipt this Period 200.00

**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 780 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JEFFREY S. FREELAND**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 88411

City HONOLULU State HI Zip Code 96830-8411

FEC ID number of contributing federal political committee. **C**

Name of Employer BRANCH HEAD Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02025**

Amount of Each Receipt this Period  
50.00

**B. MRS. BETTY J. FREEMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 302 COUNTRY CLUB DRIVE

City LAURENS State SC Zip Code 29360-7706

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02026**

Amount of Each Receipt this Period  
1.00

**C. MR. THEODORE N. FREEMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 SPRING HARBOR DRIVE  
APARTMENT 568

City COLUMBUS State GA Zip Code 31904-4639

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02027**

Amount of Each Receipt this Period  
110.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 161.00

**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 781 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THEODORE N. FREEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 SPRING HARBOR DRIVE  
 APARTMENT 568  
 City COLUMBUS State GA Zip Code 31904-4639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI0208**  
 Amount of Each Receipt this Period 250.00

**B. MR. FERREL FREER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1024 N. SAN FRANCISCO STREET  
 SUITE 103  
 City FLAGSTAFF State AZ Zip Code 86001-3266  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SACO MANAGEMENT CO. Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI0209**  
 Amount of Each Receipt this Period 100.00

**C. MR. KURT FREIDHOFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 148 FREIDHOFF LANE  
 City JOHNSTOWN State PA Zip Code 15902-1401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02030**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 375.00  
**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 782 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. FRED C. FREIJE**

Mailing Address 23 CHERYL COURT

City State Zip Code  
TROY NY 12180-7008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MOHAWK PAPER MAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI02031**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT W. FRENCH**

Mailing Address 6531 W. GOLD MOUNTAIN PASS

City State Zip Code  
PHOENIX AZ 85083-7455

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED CIVIL ENGINEER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02032**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MRS. ELEANOR FREUDENSTEIN**

Mailing Address 4595 VIA HUERTO

City State Zip Code  
SANTA BARBARA CA 93110-2323

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED ARTIST

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02033**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00

**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 783 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID FREY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4829 FERGUSON ROAD  
 City INDIANAPOLIS State IN Zip Code 46239-7825  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02034**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. DOUGLAS E. FREY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55207 BROUGHTON  
 City CHAPEL HILL State NC Zip Code 27517-8560  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02035**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. DOUGLAS E. FREY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55207 BROUGHTON  
 City CHAPEL HILL State NC Zip Code 27517-8560  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02036**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	320.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 784 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. H. MAX FRICKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2401 PGA BLVD., SUITE 148  
 City PALM BEACH GARDENS State FL Zip Code 33410-3515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02037**  
 Amount of Each Receipt this Period 250.00

**B. MR. H. MAX FRICKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2401 PGA BLVD., SUITE 148  
 City PALM BEACH GARDENS State FL Zip Code 33410-3515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02038**  
 Amount of Each Receipt this Period 120.00

**C. MR. H. MAX FRICKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2401 PGA BLVD., SUITE 148  
 City PALM BEACH GARDENS State FL Zip Code 33410-3515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02039**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 420.00  
**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 785 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. HOWARD C. FRIDAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4019 OLD CANTON ROAD  
 City JACKSON State MS Zip Code 39216-3723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02040**  
 Amount of Each Receipt this Period  
 440.00

**B. MR. DAVID L. FRIED**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2741 GULF OF MEXICO DRIVE  
 City LONGBOAT KEY State FL Zip Code 34228-3108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer QBE Occupation INSURANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02041**  
 Amount of Each Receipt this Period  
 5000.00

**C. MS. JOAN FRIEDGEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5685 LAKE MURRAY BLVD.  
 UNIT D.  
 City LA MESA State CA Zip Code 91942-1901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02042**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5490.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 786 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JOAN FRIEDGEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5685 LAKE MURRAY BLVD.  
 UNIT D.  
 City LA MESA State CA Zip Code 91942-1901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02043**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. HOWARD FRIEDMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16237 MEADOWRIDGE ROAD  
 City ENCINO State CA Zip Code 91436-3604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02044**  
 Amount of Each Receipt this Period  
 251.00

**C. MR. SEMYON D. FRIEDMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 S. POINTE DRIVE  
 APARTMENT 1807  
 City MIAMI BEACH State FL Zip Code 33139-7383  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MARYLAND HEALTHCARE COMPANY Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI02045**  
 Amount of Each Receipt this Period  
 550.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 901.00  
**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 787 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. ALAN FRIGY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2163 W. RAVINA PARK ROAD

City DECATUR	State IL	Zip Code 62526-3067
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer K. M. B. S. C.	Occupation PHYSICIAN
------------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
640.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02046**

Amount of Each Receipt this Period  
 140.00

**B. MR. JAMES F. FROEMMING**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 6893

City ROCKFORD	State IL	Zip Code 61125-1893
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
332.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02047**

Amount of Each Receipt this Period  
 332.00

**C. MR. CHARLES W. FROST**  
Full Name (Last, First, Middle Initial)

Mailing Address 176 S. COLLIER BLVD.  
UNIT 405

City MARCO ISLAND	State FL	Zip Code 34145-4336
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

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  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI02048**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	522.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 788 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES W. FROST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 176 S. COLLIER BLVD.  
 UNIT 405  
 City MARCO ISLAND State FL Zip Code 34145-4336  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02049**  
 Amount of Each Receipt this Period 50.00

**B. MS. HELEN M. FROWICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 OHUA AVENUE  
 APARTMENT T1-2806  
 City HONOLULU State HI Zip Code 96815-3613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02050**  
 Amount of Each Receipt this Period 1.00

**C. MS. HELEN M. FROWICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 OHUA AVENUE  
 APARTMENT T1-2806  
 City HONOLULU State HI Zip Code 96815-3613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02051**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 301.00  
**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 789 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. GERTRUDE BROWN FRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5781 MORLAND DRIVE N.  
 City ADAMSTOWN State MD Zip Code 21710-9445  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 296.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02052**  
 Amount of Each Receipt this Period 121.00

**B. MR. DONALD W. FRYE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12 GAGE COURT  
 City HOUSTON State TX Zip Code 77024-4409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation GEOPHYSICIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02053**  
 Amount of Each Receipt this Period 1000.00

**C. MR. VERNON L. FRYKHOLM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 660 W. EVERGREEN FARM WAY  
 City SEQUIM State WA Zip Code 98382-5069  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02054**  
 Amount of Each Receipt this Period 75.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1196.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 790 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. VERNON L. FRYKHOLM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 660 W. EVERGREEN FARM WAY  
 City SEQUIM State WA Zip Code 98382-5069  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02055**  
 Amount of Each Receipt this Period  
 120.00

**B. MS. DIANA FUCHS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3235 MARONEAL STREET  
 City HOUSTON State TX Zip Code 77025-2020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02056**  
 Amount of Each Receipt this Period  
 210.00

**C. MS. DIANA FUCHS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3235 MARONEAL STREET  
 City HOUSTON State TX Zip Code 77025-2020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02057**  
 Amount of Each Receipt this Period  
 105.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	435.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 791 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. DIANA FUCHS**  
Full Name (Last, First, Middle Initial)

Mailing Address 3235 MARONEAL STREET

City HOUSTON State TX Zip Code 77025-2020

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02058**

Amount of Each Receipt this Period  
 200.00

**B. MRS. BETTY FUDGE**  
Full Name (Last, First, Middle Initial)

Mailing Address 202 KELLY DRIVE

City VICTORIA State TX Zip Code 77904-1540

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation RADIO TOWER RENTAL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02059**

Amount of Each Receipt this Period  
 31.00

**C. MR. HAROLD FUE**  
Full Name (Last, First, Middle Initial)

Mailing Address 916 ROBLE LANE

City SANTA BARBARA State CA Zip Code 93103-2044

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02060**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 731.00

**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 792 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. JOSE A. FUENTES</b>		Date of Receipt MM / DD / YYYY 03 / 07 / 2014 <b>Transaction ID : 2014M04L11AI02061</b>
Mailing Address 513 HORN POINT DRIVE		Amount of Each Receipt this Period 5000.00
City ANNAPOLIS	State MD	Zip Code 21403-3325
FEC ID number of contributing federal political committee. C		
Name of Employer EASTPORT STRATEGIES LLC	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. MR. GEORGE N. FUGELSANG</b>		Date of Receipt MM / DD / YYYY 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI02062</b>
Mailing Address 4001 N. OCEAN BLVD. UNIT 204		Amount of Each Receipt this Period 120.00
City GULF STREAM	State FL	Zip Code 33483-7526
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>C. DR. MICHAEL JOHN FUGLE</b>		Date of Receipt MM / DD / YYYY 03 / 11 / 2014 <b>Transaction ID : 2014M04L11AI02063</b>
Mailing Address 4815 SHELDON ROAD		Amount of Each Receipt this Period 50.00
City ROCHESTER	State MI	Zip Code 48306-2119
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5170.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 793 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. MICHAEL JOHN FUGLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4815 SHELDON ROAD  
 City ROCHESTER State MI Zip Code 48306-2119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02064**  
 Amount of Each Receipt this Period 40.00

**B. DR. MICHAEL JOHN FUGLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4815 SHELDON ROAD  
 City ROCHESTER State MI Zip Code 48306-2119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02065**  
 Amount of Each Receipt this Period 62.00

**C. MR. FRED FUKUNAGA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55 S. KUKUI STREET APARTMENT 2609  
 City HONOLULU State HI Zip Code 96813-2325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02066**  
 Amount of Each Receipt this Period 155.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 257.00  
**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 794 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. HERBERT FULD**

Mailing Address 202 KINGMAN AVENUE E.

City State Zip Code  
BATTLE CREEK MI 49014-5139

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
203.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02067**

Amount of Each Receipt this Period  
103.00

Full Name (Last, First, Middle Initial)  
**B. MR. GARY FULK**

Mailing Address P.O. BOX 669

City State Zip Code  
JAMESTOWN NC 27282-0669

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02068**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**C. MRS. CAROL C. FULKERSON**

Mailing Address 1688 STABLE ROCK ROAD

City State Zip Code  
PRESCOTT AZ 86303-6938

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02069**

Amount of Each Receipt this Period  
201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 604.00

**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 795 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANK E. FULLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4335 THOMAS LANE  
 City BEAUMONT State TX Zip Code 77706-7730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EPISCOPAL CHURCH Occupation CLERGYMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI02070**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. ROBERT O. FULLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10360 OLD BLACK CANYON HIGHWAY  
 City DEWEY State AZ Zip Code 86327-5005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02071**  
 Amount of Each Receipt this Period  
 1.00

**C. MS. ANN E. FULLERTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2014 KIRKWOOD HIGHWAY  
 City WILMINGTON State DE Zip Code 19805-4922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02072**  
 Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 231.00  
**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 796 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ANN E. FULLERTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2014 KIRKWOOD HIGHWAY  
 City State Zip Code  
 WILMINGTON DE 19805-4922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02073**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. RICHARD E. FULLERTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27432 ARBOR STRAND DRIVE  
 City State Zip Code  
 BONITA SPRINGS FL 34134-2696  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 421.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02074**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. RICHARD E. FULLERTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27432 ARBOR STRAND DRIVE  
 City State Zip Code  
 BONITA SPRINGS FL 34134-2696  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 421.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02075**  
 Amount of Each Receipt this Period  
 151.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 272.00  
**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 797 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. REED C. FULTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 KNUBBLE ROAD  
 City GEORGETOWN State ME Zip Code 04548-3116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 915.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02076**  
 Amount of Each Receipt this Period  
 515.00

**B. MR. REED C. FULTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 KNUBBLE ROAD  
 City GEORGETOWN State ME Zip Code 04548-3116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 915.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02077**  
 Amount of Each Receipt this Period  
 400.00

**C. MRS. ELLEN FUNK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 608 COUNTRY CLUB LANE  
 City ONALASKA State WI Zip Code 54650-8799  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02078**  
 Amount of Each Receipt this Period  
 251.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1166.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 798 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID A. FURNAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 882 COLBERT STREET S.  
 City COLLIERVILLE State TN Zip Code 38017-6917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02079**  
 Amount of Each Receipt this Period 250.00

**B. MR. DAVID A. FURNAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 882 COLBERT STREET S.  
 City COLLIERVILLE State TN Zip Code 38017-6917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02080**  
 Amount of Each Receipt this Period 1.00

**C. MRS. ROSETTA FURNAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 ROCK CREEK ROAD  
 City HOT SPRINGS State AR Zip Code 71913-9234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02081**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 751.00  
**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 799 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GARY M. FURST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 47 CHICKASHA DRIVE  
 City State Zip Code  
 CHEROKEE VILLAGE AR 72529-3001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02082**  
 Amount of Each Receipt this Period  
 20.00

**B. MR. GARY M. FURST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 47 CHICKASHA DRIVE  
 City State Zip Code  
 CHEROKEE VILLAGE AR 72529-3001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02083**  
 Amount of Each Receipt this Period  
 20.00

**C. MS. EVANGELINE B. FUSOAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 249 LINDEN STREET  
 City State Zip Code  
 MANCHESTER NH 03104-3319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 810.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02084**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 160.00  
**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 800 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. EVANGELINE B. FUSOAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 249 LINDEN STREET  
 City MANCHESTER State NH Zip Code 03104-3319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02085**  
 Amount of Each Receipt this Period 50.00

**B. MS. EVANGELINE B. FUSOAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 249 LINDEN STREET  
 City MANCHESTER State NH Zip Code 03104-3319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02086**  
 Amount of Each Receipt this Period 51.00

**C. MS. EVANGELINE B. FUSOAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 249 LINDEN STREET  
 City MANCHESTER State NH Zip Code 03104-3319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02087**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 151.00  
**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 801 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SHARON L. GADLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9087 SAVOY STREET  
 City RIVERSIDE State CA Zip Code 92503-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02088**  
 Amount of Each Receipt this Period  
 35.00

**B. MS. SHARON L. GADLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9087 SAVOY STREET  
 City RIVERSIDE State CA Zip Code 92503-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02089**  
 Amount of Each Receipt this Period  
 15.00

**C. MS. SHARON L. GADLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9087 SAVOY STREET  
 City RIVERSIDE State CA Zip Code 92503-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02090**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 100.00  
**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 802 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CAROL PAYNE GAEDE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 941 FOX HALL DRIVE  
 City WINSTON SALEM State NC Zip Code 27106-4431  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SALEM PLASTIC SURGERY, INC. Occupation ADMINISTRATIVE MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02091**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. WILLIAM G. GAHAGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 601 SMITHS BRIDGE ROAD  
 City WILMINGTON State DE Zip Code 19807-1323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02092**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. WILLIAM GAINES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 113 LAMB AVENUE  
 City MACON State MO Zip Code 63552-1046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02093**  
 Amount of Each Receipt this Period  
 201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1301.00  
**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 803 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JANET R. GAIRING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 635 MASTERPIECE DRIVE  
 City State Zip Code  
 SUN CITY CENTER FL 33573-6598  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI02094**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. JOHN J. GAITHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7752 BATAVIA ROAD  
 City State Zip Code  
 SAN DIEGO CA 92126-1024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ALBERTSON'S BAGGER  
 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  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02095**  
 Amount of Each Receipt this Period  
 30.00

**C. MR. JOHN J. GAITHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7752 BATAVIA ROAD  
 City State Zip Code  
 SAN DIEGO CA 92126-1024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ALBERTSON'S BAGGER  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02096**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00  
**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 804 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. MYLES B. GALCERAN</b>		Date of Receipt
Mailing Address 5720 EMILY LANE		M M M / D D D / Y Y Y Y Y Y 03 / 27 / 2014
City	State	Zip Code
BEAUMONT	TX	77713-8786
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI02097</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		200.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	400.00	

Full Name (Last, First, Middle Initial) <b>B. MR. HARRY J. GALLAGHER</b>		Date of Receipt
Mailing Address 1611 ESPOIR DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2014
City	State	Zip Code
LEESVILLE	LA	71446-5250
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI02098</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		100.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	300.00	

Full Name (Last, First, Middle Initial) <b>C. JOHN GALLAGHER</b>		Date of Receipt
Mailing Address 2 TOWN PL		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2014
City	State	Zip Code
BRYN MAWR	PA	19010-3419
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI02099</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		1000.00
Name of Employer	Occupation	
MORGAN STANLEY	EXECUTIVE DIRECTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 805 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. LTC. WALLACE M. GALLANT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2220 EXECUTIVE DRIVE  
 APARTMENT 240  
 City HAMPTON State VA Zip Code 23666-6611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02100**  
 Amount of Each Receipt this Period  
 50.00

**B. LTC. WALLACE M. GALLANT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2220 EXECUTIVE DRIVE  
 APARTMENT 240  
 City HAMPTON State VA Zip Code 23666-6611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02101**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. DENNIS P. GALLAWAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16222 MONTEREY LANE  
 SPACE 173  
 City HUNTINGTON BEACH State CA Zip Code 92649-6213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02102**  
 Amount of Each Receipt this Period  
 145.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	445.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 806 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DENNIS P. GALLAWAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16222 MONTEREY LANE  
 SPACE 173  
 City HUNTINGTON BEACH State CA Zip Code 92649-6213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02103**  
 Amount of Each Receipt this Period 145.00

**B. MRS. GENEVIEVE GALLIFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7425 PELICAN BAY BLVD.  
 City NAPLES State FL Zip Code 34108-7599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02104**  
 Amount of Each Receipt this Period 50.00

**C. MRS. GENEVIEVE GALLIFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7425 PELICAN BAY BLVD.  
 City NAPLES State FL Zip Code 34108-7599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02105**  
 Amount of Each Receipt this Period 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	305.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 807 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. DAVID GALLOWAY</b>		Date of Receipt
Mailing Address 3021 MAGNOLIA LANE		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City State Zip Code BEDFORD TX 76021-2804		<b>Transaction ID : 2014M04L11AI02106</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="401.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. DAVID GALLOWAY</b>		Date of Receipt
Mailing Address 3021 MAGNOLIA LANE		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code BEDFORD TX 76021-2804		<b>Transaction ID : 2014M04L11AI02107</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="101.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="401.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. MICHAEL A. GALLUCCI</b>		Date of Receipt
Mailing Address 2567 WESTRIDGE ROAD		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City State Zip Code LOS ANGELES CA 90049-1232		<b>Transaction ID : 2014M04L11AI02108</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="35.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="236.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 808 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL A. GALLUCCI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2567 WESTRIDGE ROAD  
 City State Zip Code  
 LOS ANGELES CA 90049-1232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02109**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. MICHAEL A. GALLUCCI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2567 WESTRIDGE ROAD  
 City State Zip Code  
 LOS ANGELES CA 90049-1232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02110**  
 Amount of Each Receipt this Period  
 55.00

**C. MR. GAYLE GALVAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3705 BOGNER DRIVE  
 City State Zip Code  
 WOODBRIDGE VA 22193-1037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 451.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02111**  
 Amount of Each Receipt this Period  
 200.00

**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 809 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GAYLE GALVAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3705 BOGNER DRIVE  
 City WOODBRIDGE State VA Zip Code 22193-1037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02112**  
 Amount of Each Receipt this Period  
 251.00

**B. MS. GISELA GALVEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8240 S.W. 142ND AVENUE  
 City MIAMI State FL Zip Code 33183-4019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation SECRETARY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02113**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. GISELA GALVEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8240 S.W. 142ND AVENUE  
 City MIAMI State FL Zip Code 33183-4019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation SECRETARY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02114**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	401.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 810 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BARBARA GAMACHE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1042 WESTERN HILLS DRIVE  
 City FLINT State MI Zip Code 48532-2159  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02115**  
 Amount of Each Receipt this Period  
 135.00

**B. MR. RON GAMBILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 127 GILLETTE DRIVE  
 City FRANKLIN State TN Zip Code 37069-4113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE OF TENNESSEE Occupation EDUCATION ADMINISTRATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02116**  
 Amount of Each Receipt this Period  
 121.00

**C. MR. EDWARD A. GAMBLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6090 LEEDS MANOR ROAD  
 City HUME State VA Zip Code 22639-1913  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02117**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 756.00  
**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 811 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL G. GANGEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11628 BROOKWOOD AVENUE  
 City State Zip Code  
 SHAWNEE MISSION KS 66211-2900  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CHAD EQUIPMENT BUSINESS OWNER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02118**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. ARTHUR GARCIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1279 MORRIS CIRCLE  
 City State Zip Code  
 HOPKINSVILLE KY 42240-9154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02119**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. GEORGE GARCIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6441 N. PLACITA ALTA REPOSA  
 City State Zip Code  
 TUCSON AZ 85750-4201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 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  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02120**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1450.00  
**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 812 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. LAWRENCE A. GARCIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 94 VINE STREET  
 City CHESTNUT HILL State MA Zip Code 02467-3050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HARVARD MEDICAL FACULTY PHYSICIANS Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02121**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. LEE C. GARCIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10641 E. PROSPECT POINT DRIVE  
 City SCOTTSDALE State AZ Zip Code 85262-3320  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTMENT ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02122**  
 Amount of Each Receipt this Period  
 110.00

**C. MS. BARBARA JANE GARDNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2121 N. MONROE STREET APARTMENT C.  
 City ARLINGTON State VA Zip Code 22207-3869  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02123**  
 Amount of Each Receipt this Period  
 75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 685.00  
**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 813 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. BARBARA JANE GARDNER</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 12 / 2014 <b>Transaction ID : 2014M04L11AI02124</b>
Mailing Address 2121 N. MONROE STREET APARTMENT C.		Amount of Each Receipt this Period 160.00
City ARLINGTON	State VA Zip Code 22207-3869	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 235.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MRS. BETTY GARDNER</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2014 <b>Transaction ID : 2014M04L11AI02125</b>
Mailing Address 1572 GOODIN HOLLOW ROAD		Amount of Each Receipt this Period 10.00
City NOEL	State MO Zip Code 64854-7235	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 230.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MRS. BETTY GARDNER</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 07 / 2014 <b>Transaction ID : 2014M04L11AI02126</b>
Mailing Address 1572 GOODIN HOLLOW ROAD		Amount of Each Receipt this Period 35.00
City NOEL	State MO Zip Code 64854-7235	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 230.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	205.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 814 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BETTY GARDNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1572 GOODIN HOLLOW ROAD  
 City NOEL State MO Zip Code 64854-7235  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02127**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. BETTY GARDNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1572 GOODIN HOLLOW ROAD  
 City NOEL State MO Zip Code 64854-7235  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02128**  
 Amount of Each Receipt this Period  
 20.00

**C. MRS. BETTY GARDNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1572 GOODIN HOLLOW ROAD  
 City NOEL State MO Zip Code 64854-7235  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02129**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 95.00  
**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 815 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CLYDE T. GARDNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 18911 VENTURE DRIVE

City State Zip Code  
POINT VENTURE TX 78645-8563

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02130**

Amount of Each Receipt this Period  
75.00

**B. CAPT. IRVING GARDNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4109 HEATHERWOOD

City State Zip Code  
YARMOUTH PORT MA 02675-1454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02131**

Amount of Each Receipt this Period  
51.00

**C. MR. MICHAEL GARDNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 17 BERKLEY CIRCLE

City State Zip Code  
HINGHAM MA 02043-3354

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02132**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 246.00

**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 816 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD GARDNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 HANOVER DRIVE  
 City BRANDON State MS Zip Code 39047-6535  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NEW YORK LIFE INSURANCE COMPANY Occupation DIRECTOR OF DEVELOPMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02133**  
 Amount of Each Receipt this Period  
 105.00

**B. MR. B. J. GARET**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 210 HARDWICK ROAD  
 City WOODSIDE State CA Zip Code 94062-2325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02134**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. KATHLEEN ANN GARGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18251 JOHNSON ROAD  
 City BAKERSFIELD State CA Zip Code 93314-8920  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TREASURER Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02135**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1205.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 817 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. HALLY R. GARNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 10 DARRO WAY

City HOT SPRINGS VILLAGE State AR Zip Code 71909-7764

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02136**

Amount of Each Receipt this Period  
 276.00

**B. MR. JOHN M. GARNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 135 CUELLO COURT

City PONTE VEDRA BEACH State FL Zip Code 32082-4072

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 751.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02137**

Amount of Each Receipt this Period  
 500.00

**C. MR. JOHN M. GARNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 135 CUELLO COURT

City PONTE VEDRA BEACH State FL Zip Code 32082-4072

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 751.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02138**

Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 777.00

**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 818 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KENNETH GARRELTS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1613 18TH AVENUE W.  
 City State Zip Code  
 SPENCER IA 51301-2736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02139**  
 Amount of Each Receipt this Period  
 160.00

**B. MRS. KENNETH GARRELTS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1613 18TH AVENUE W.  
 City State Zip Code  
 SPENCER IA 51301-2736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02140**  
 Amount of Each Receipt this Period  
 106.00

**C. MRS. MARTHA ANN GARRIOTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1427 HIGH MEADOWS DRIVE  
 City State Zip Code  
 NORMAN OK 73071-3662  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02141**  
 Amount of Each Receipt this Period  
 15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 281.00  
**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 819 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. MARTHA ANN GARRIOTT**

Mailing Address 1427 HIGH MEADOWS DRIVE

City State Zip Code  
NORMAN OK 73071-3662

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02142**

Amount of Each Receipt this Period  
15.00

Full Name (Last, First, Middle Initial)  
**B. MRS. MARTHA ANN GARRIOTT**

Mailing Address 1427 HIGH MEADOWS DRIVE

City State Zip Code  
NORMAN OK 73071-3662

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02143**

Amount of Each Receipt this Period  
16.00

Full Name (Last, First, Middle Initial)  
**C. MR. KENNETH M. GARRISON**

Mailing Address 1757 CARTINA WAY

City State Zip Code  
VENICE FL 34292-4318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02144**

Amount of Each Receipt this Period  
76.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 107.00

**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 820 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT LANE GARRISON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 401 E. WACO STREET  
 City ENNIS State TX Zip Code 75119-4944  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02145**  
 Amount of Each Receipt this Period 50.00

**B. MR. ARTHUR J. GARTLAND JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 MOSS HAMMOCK LANE  
 City SAVANNAH State GA Zip Code 31411-2509  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI02146**  
 Amount of Each Receipt this Period 1000.00

**C. MR. EUGENE A. GARWOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17890 WETSTONE ROAD  
 City NORTH FORT MYERS State FL Zip Code 33917-4709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02147**  
 Amount of Each Receipt this Period 51.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1101.00  
**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 821 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ALONZO GATES**

Mailing Address 785 BURR ROAD

City State Zip Code  
SAN ANTONIO TX 78209-6121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02148**

Amount of Each Receipt this Period  
3000.00

Full Name (Last, First, Middle Initial)  
**B. MR. THOMAS E. GATES**

Mailing Address 20 STILL HILL ROAD ROAD 1

City State Zip Code  
SANDY HOOK CT 06482-1313

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02149**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MR. THOMAS E. GATES**

Mailing Address 20 STILL HILL ROAD ROAD 1

City State Zip Code  
SANDY HOOK CT 06482-1313

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02150**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3100.00

**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 822 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. THOMAS E. GATES**

Mailing Address 20 STILL HILL ROAD  
ROAD 1

City State Zip Code  
SANDY HOOK CT 06482-1313

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02151**

Amount of Each Receipt this Period  
51.00

Full Name (Last, First, Middle Initial)  
**B. MR. COREY G. GATHMAN**

Mailing Address 15850 E TRUE GRIT LANE

City State Zip Code  
DEWEY AZ 86327-6639

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED BUSINESS OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02152**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. MR. MAURICE P. GAUDET III**

Mailing Address 538 REDBUD LANE

City State Zip Code  
SLIDELL LA 70460-5267

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
J. & M. INDUSTRIES, INC. C.E.O.

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  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02153**

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 336.00

**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 823 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MAURICE P. GAUDET III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 538 REDBUD LANE  
 City SLIDELL State LA Zip Code 70460-5267  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer J. & M. INDUSTRIES, INC. Occupation C.E.O.  
 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  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02154**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. MAURICE P. GAUDET III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 538 REDBUD LANE  
 City SLIDELL State LA Zip Code 70460-5267  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer J. & M. INDUSTRIES, INC. Occupation C.E.O.  
 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  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02155**  
 Amount of Each Receipt this Period  
 35.00

**C. MR. MAURICE P. GAUDET III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 538 REDBUD LANE  
 City SLIDELL State LA Zip Code 70460-5267  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer J. & M. INDUSTRIES, INC. Occupation C.E.O.  
 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  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI02156**  
 Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 95.00  
**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 824 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DIANE F. GAUDIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 702 RENALDO DRIVE  
 City DICKENSON State TX Zip Code 77539  
 FEC ID number of contributing federal political committee. C  
 Name of Employer D & G COMMUNICATIONS, INC. Occupation C.F.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02157**  
 Amount of Each Receipt this Period 50.00

**B. MR. FLOYD I. GAUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5723 CEDAR TRACE COURT  
 City RENO State NV Zip Code 89511-4362  
 FEC ID number of contributing federal political committee. C  
 Name of Employer SELF-EMPLOYED Occupation MUSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02158**  
 Amount of Each Receipt this Period 120.00

**C. MR. FLOYD I. GAUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5723 CEDAR TRACE COURT  
 City RENO State NV Zip Code 89511-4362  
 FEC ID number of contributing federal political committee. C  
 Name of Employer SELF-EMPLOYED Occupation MUSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02159**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 420.00  
**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 825 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. NORMAN W. GAVIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 364 EAGLE DRIVE  
 City JUPITER State FL Zip Code 33477-4066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02160**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. JERRY F. GAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1910 MADISON P.O. BOX 53  
 City MEMPHIS State TN Zip Code 38104-2620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02161**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. JOHN GAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 2500  
 City PALM BEACH State FL Zip Code 33480-2500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02162**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00  
**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 826 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN GAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 2500  
 City PALM BEACH State FL Zip Code 33480-2500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02163**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. GEORGE GAYNOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1500 LAKESHORE DRIVE APARTMENT 002A  
 City CHICAGO State IL Zip Code 60610-6686  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02164**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. LEON GEAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7550 N. 16TH ST. APT 3201  
 City PHOENIX State AZ Zip Code 85020-7647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02165**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00  
**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 827 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HERBERT GEDGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1330 FESTIVAL LANE  
 City BRUTUS State MI Zip Code 49716-9500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02166**  
 Amount of Each Receipt this Period  
 275.00

**B. MR. C. E. GEHR JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5621 NORLAND AVENUE  
 City NEW ORLEANS State LA Zip Code 70131-3943  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02167**  
 Amount of Each Receipt this Period  
 55.00

**C. MR. C. E. GEHR JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5621 NORLAND AVENUE  
 City NEW ORLEANS State LA Zip Code 70131-3943  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 435.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02168**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	380.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 828 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRAD C. GEHRKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 715 6TH STREET N.W.  
 APARTMENT 1103  
 City WASHINGTON State DC Zip Code 20001-5914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. DAIRY EXPORT COUNCIL Occupation ECONOMIST/TRADE ANALYST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02169**  
 Amount of Each Receipt this Period  
 330.00

**B. MS. ELIZABETH H. GELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 E. SPRUCE AVENUE  
 City FRESNO State CA Zip Code 93720-3314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02170**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. ELIZABETH H. GELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 E. SPRUCE AVENUE  
 City FRESNO State CA Zip Code 93720-3314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02171**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 531.00  
**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 829 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. REUVEN GELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1685 S. COLORADO BLVD.  
 City DENVER State CO Zip Code 80222-4000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02172**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. STANLEY L. GENDLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 ALTA LOMA ROAD APARTMENT 1503  
 City LOS ANGELES State CA Zip Code 90069-2441  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02173**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. PETER P. GENERO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1904 YORK COURT  
 City FORT PIERCE State FL Zip Code 34982-5639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02174**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00  
**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 830 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. FRANCES S. GENOVA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15 CUSHING DRIVE  
 City BRIDGEWATER State NJ Zip Code 08807-1495  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GENOVA INSURANCE AGENCY Occupation BOOKKEEPER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 965.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02175**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. RALPH A. GEORGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24269 LAGLORITA CIRCLE  
 City NEWHALL State CA Zip Code 91321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02176**  
 Amount of Each Receipt this Period  
 15.00

**C. MS. CATHERINE M. GEORGENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 407 WOODBRIDGE DRIVE UNIT B.  
 City RIDGE State NY Zip Code 11961-1394  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 545.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02177**  
 Amount of Each Receipt this Period  
 70.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 135.00  
**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 832 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CATHERINE M. GEORGENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 407 WOODBRIDGE DRIVE  
 UNIT B.  
 City RIDGE State NY Zip Code 11961-1394  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 545.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02181**  
 Amount of Each Receipt this Period  
 25.00

**B. MS. CATHERINE M. GEORGENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 407 WOODBRIDGE DRIVE  
 UNIT B.  
 City RIDGE State NY Zip Code 11961-1394  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 545.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02182**  
 Amount of Each Receipt this Period  
 60.00

**C. MRS. HENRY GERBER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2520 S. NAPA STREET  
 City SPOKANE State WA Zip Code 99203-3832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02183**  
 Amount of Each Receipt this Period  
 400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 485.00  
**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 833 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. L. PAUL GERENCSE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3960 SIOUX AVENUE  
 City SAN DIEGO State CA Zip Code 92117-5725  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. MARINE CORPS Occupation CIVIL SERVANT  
 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  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02184**  
 Amount of Each Receipt this Period  
 750.00

**B. MS. JEN GERHART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 66 HUNT CLUB DRIVE  
 City COLLEGEVILLE State PA Zip Code 19426-3979  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation DENTAL SALES REP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02185**  
 Amount of Each Receipt this Period  
 35.00

**C. MS. JEN GERHART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 66 HUNT CLUB DRIVE  
 City COLLEGEVILLE State PA Zip Code 19426-3979  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation DENTAL SALES REP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02186**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 905.00  
**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 834 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. JEN GERHART**

Mailing Address **66 HUNT CLUB DRIVE**

City **COLLEGEVILLE** State **PA** Zip Code **19426-3979**

FEC ID number of contributing federal political committee. **C**

Name of Employer **REQUESTED** Occupation **DENTAL SALES REP**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt  
**03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI02187**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**B. MS. PEGGY GERLACHER**

Mailing Address **2908 VANDEVER STREET**

City **BROOKEVILLE** State **MD** Zip Code **20833-2637**

FEC ID number of contributing federal political committee. **C**

Name of Employer **REQUESTED** Occupation **REQUESTED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
**03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI02188**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**C. MR. MARK S. GERMAIN**

Mailing Address **8208 WARRENS WAY**

City **WANAQUE** State **NJ** Zip Code **07465-1610**

FEC ID number of contributing federal political committee. **C**

Name of Employer **REQUESTED** Occupation **REQUESTED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**03 / 14 / 2014**  
**Transaction ID : 2014M04L11AI02189**

Amount of Each Receipt this Period  
**150.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>700.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 835 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARK S. GERMAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8208 WARRENS WAY  
 City WANAQUE State NJ Zip Code 07465-1610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02190**  
 Amount of Each Receipt this Period  
 50.00

**B. MRS. SONJA GERQUEST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5101 ASHLAR VILLAGE  
 City WALLINGFORD State CT Zip Code 06492-6102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1170.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02191**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. JOHN GERRO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 530 S. GLENOAKS BLVD.  
 SUITE 200  
 City BURBANK State CA Zip Code 91502-2753  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02192**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1100.00  
**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 836 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. LARRY GESKE**

Mailing Address 4704 E. FLOSSMOOR CIRCLE

City MESA State AZ Zip Code 85206-2731

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02193**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. RAYMOND S. GIAMPAOLI**

Mailing Address P.O. BOX 65  
LIVE OAK FARMS

City LEGRAND State CA Zip Code 95333-0065

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02194**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. MR. ANDREW GIANOPOULOS**

Mailing Address 5035 MAPLETON DRIVE

City WEST LINN State OR Zip Code 97068-2149

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02195**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 837 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. PETER GIBBONS**

Mailing Address 102B PASEO DE LA PLAYA

City State Zip Code  
REDONDO BEACH CA 90277-5346

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MATTELL, INC. EVP GLOBAL OPERATIONS

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02196**

Amount of Each Receipt this Period  
15000.00

Full Name (Last, First, Middle Initial)  
**B. MR. STEVE A. GIBBS**

Mailing Address 16035 121ST AVENUE

City State Zip Code  
JAMAICA NY 11434-2408

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MAINTENANCE MAINTENANCE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
273.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02197**

Amount of Each Receipt this Period  
150.00

Full Name (Last, First, Middle Initial)  
**C. MR. SAMUEL GIBERGA**

Mailing Address 170 WALNUT STREET  
APARTMENT 6C

City State Zip Code  
NEW ORLEANS LA 70118-4867

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02198**

Amount of Each Receipt this Period  
115.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15265.00

**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 838 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SAMUEL GIBERGA**  
Full Name (Last, First, Middle Initial)

Mailing Address 170 WALNUT STREET  
APARTMENT 6C

City NEW ORLEANS State LA Zip Code 70118-4867

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02199**

Amount of Each Receipt this Period  
150.00

**B. MS. DEBRA M. GIBSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 8830 OUTVIEW COURT

City HOUSTON State TX Zip Code 77040-1563

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CERTIFIED PUBLIC ACCOUNTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
511.00

Date of Receipt  
03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02200**

Amount of Each Receipt this Period  
1.00

**C. MR. FRED D. GIBSON JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 3204 PLAZA DE RAFAEL

City LAS VEGAS State NV Zip Code 89102-4024

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02201**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1151.00

**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 839 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. VIVIAN LILLARD GIBSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2389 STEPHENS CIRCLE  
 City GAINESVILLE State GA Zip Code 30506-1188  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02202**  
 Amount of Each Receipt this Period  
 241.00

**B. MR. LLOYD F. GIEGEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5806 GONDOLIER DRIVE  
 City NEW BERN State NC Zip Code 28560-9007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02203**  
 Amount of Each Receipt this Period  
 110.00

**C. MR. SCOTT A. GIEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 65 HAYES STREET  
 City VALENCIA State PA Zip Code 16059-8753  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CARPENTER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02204**  
 Amount of Each Receipt this Period  
 201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 552.00  
**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 840 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARTHA P. GIESE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 FRAMINGHAM LANE  
 City State Zip Code  
 PITTSFORD NY 14534-1048  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02205**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. YALE GIESZL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 6535  
 City State Zip Code  
 SNOWMASS VILLAGE CO 81615-6535  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02206**  
 Amount of Each Receipt this Period  
 500.00

**C. MRS. GLADYS GIFFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 10  
 City State Zip Code  
 ROSE CITY MI 48654-0010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02207**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 841 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. GLADYS GIFFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 10  
 City ROSE CITY State MI Zip Code 48654-0010  
 Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02208**  
 Amount of Each Receipt this Period 111.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 271.00

**B. MR. MICHAEL D. GILBERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7752 GAMID DRIVE  
 City SPRINGFIELD State VA Zip Code 22153-2215  
 Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02209**  
 Amount of Each Receipt this Period 50.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer SELF-EMPLOYED Occupation C.F.P.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

**C. MR. MICHAEL D. GILBERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7752 GAMID DRIVE  
 City SPRINGFIELD State VA Zip Code 22153-2215  
 Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02210**  
 Amount of Each Receipt this Period 25.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer SELF-EMPLOYED Occupation C.F.P.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 186.00  
**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 842 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL D. GILBERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7752 GAMID DRIVE  
 City Springfield State VA Zip Code 22153-2215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation C.F.P.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02211**  
 Amount of Each Receipt this Period 25.00

**B. MR. MICHAEL D. GILBERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7752 GAMID DRIVE  
 City Springfield State VA Zip Code 22153-2215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation C.F.P.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02212**  
 Amount of Each Receipt this Period 25.00

**C. MR. MICHAEL D. GILBERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7752 GAMID DRIVE  
 City Springfield State VA Zip Code 22153-2215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation C.F.P.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02213**  
 Amount of Each Receipt this Period 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00  
**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 843 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL D. GILBERT**  
Full Name (Last, First, Middle Initial)

Mailing Address 7752 GAMID DRIVE

City SPRINGFIELD State VA Zip Code 22153-2215

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation C.F.P.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02214**

Amount of Each Receipt this Period  
25.00

**B. MR. MICHAEL D. GILBERT**  
Full Name (Last, First, Middle Initial)

Mailing Address 7752 GAMID DRIVE

City SPRINGFIELD State VA Zip Code 22153-2215

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation C.F.P.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02215**

Amount of Each Receipt this Period  
25.00

**C. MR. ROBERT H. GILBERT**  
Full Name (Last, First, Middle Initial)

Mailing Address 4986 S. INCA DRIVE

City ENGLEWOOD State CO Zip Code 80110-6452

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02216**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 170.00

**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 844 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SHELBY JEAN GILBERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5992 S. OLD STATE ROAD 15  
 City WABASH State IN Zip Code 46992-7999  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02217**  
 Amount of Each Receipt this Period  
 50.00

**B. MS. SHELBY JEAN GILBERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5992 S. OLD STATE ROAD 15  
 City WABASH State IN Zip Code 46992-7999  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02218**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. RICHARD M. GILGIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 HOLLOW CREST WAY  
 City ARDEN State NC Zip Code 28704-6605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE BILTMORE Occupation HOST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02219**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 151.00  
**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 846 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. GARY P. GILLER**

Mailing Address P.O. BOX 283

City State Zip Code  
BROOKFIELD MA 01506-0283

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02223**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MRS. CAROL GILLERAN**

Mailing Address 7520 PALMYRA AVENUE

City State Zip Code  
LAS VEGAS NV 89117-3205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
796.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02224**

Amount of Each Receipt this Period  
30.00

Full Name (Last, First, Middle Initial)  
**C. MRS. CAROL GILLERAN**

Mailing Address 7520 PALMYRA AVENUE

City State Zip Code  
LAS VEGAS NV 89117-3205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
796.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02225**

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00

**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 847 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CAROL GILLERAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7520 PALMYRA AVENUE  
 City LAS VEGAS State NV Zip Code 89117-3205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 796.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02226**  
 Amount of Each Receipt this Period  
 60.00

**B. MRS. CAROL GILLERAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7520 PALMYRA AVENUE  
 City LAS VEGAS State NV Zip Code 89117-3205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 796.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02227**  
 Amount of Each Receipt this Period  
 61.00

**C. MR. NEIL GILLESPIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 618 OAKLEY PLACE  
 City ALEXANDRIA State VA Zip Code 22302-3611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02228**  
 Amount of Each Receipt this Period  
 301.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 422.00  
**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 848 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT W. GILLESPIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1260 COUNTY LINE ROAD  
 City GATES MILLS State OH Zip Code 44040-9379  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02229**  
 Amount of Each Receipt this Period  
 15000.00

**B. MR. FRANK GILLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 69 HILLS POINT  
 City WESTPORT State CT Zip Code 06880-2948  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ATHENE LIFE R.E. LTD. Occupation C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02230**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. JAMES D. GILLMORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 216 RAINBOW DRIVE APARTEMENT 11667  
 City LIVINGSTON State TX Zip Code 77399-2016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02231**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	16200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 849 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KEITH SAMUEL GILROY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15013 W. GREYSTONE DRIVE  
 City State Zip Code  
 SUN CITY WEST AZ 85375-6114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 850.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02232**  
 Amount of Each Receipt this Period  
 750.00

**B. MR. CHARLES B. GINDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 866 CARLTON RIDGE N.E.  
 City State Zip Code  
 ATLANTA GA 30342-4340  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02233**  
 Amount of Each Receipt this Period  
 1.00

**C. MRS. BETTIE GIRLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2501 EL GRECO COVE  
 City State Zip Code  
 AUSTIN TX 78703-1510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02234**  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ► 1751.00  
**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 850 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRUCE GISSING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4729 E. SUNRISE DRIVE  
 P.M.B. 382  
 City TUCSON State AZ Zip Code 85718-4534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 571.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02235**  
 Amount of Each Receipt this Period 286.00

**B. MS. RUTH R. GLANCY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 40 PRESTON PLACE  
 City GROSE POINTE FARMS State MI Zip Code 48236-3036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTMENT MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02236**  
 Amount of Each Receipt this Period 1000.00

**C. MS. RUTH R. GLANCY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 40 PRESTON PLACE  
 City GROSE POINTE FARMS State MI Zip Code 48236-3036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTMENT MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI02237**  
 Amount of Each Receipt this Period 2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3286.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 851 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. CARTER GLASS IV**

Mailing Address 8909 REARDEN ROAD

City State Zip Code  
RICHMOND VA 23229-8118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02238**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**B. MR. CHARLES GLASS**

Mailing Address 5721 OLIVE BRANCH ROAD

City State Zip Code  
WINGATE NC 28174-8244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
TYSONS FOODS MANAGER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02239**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. MRS. KAREN GLASS**

Mailing Address 4707 DIAMOND SPRINGS DRIVE

City State Zip Code  
MISSOURI CITY TX 77459-6303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02240**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1320.00

**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 852 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. KAREN GLASS**

Mailing Address 4707 DIAMOND SPRINGS DRIVE

City Missouri City State TX Zip Code 77459-6303

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 10 / 2014**

**Transaction ID : 2014M04L11AI02241**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. MR. CARLETON D. GLAUBERMAN**

Mailing Address 1620 LOCUST AVENUE SUITE 1

City Fairmont State WV Zip Code 26554

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation MD

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 14 / 2014**

**Transaction ID : 2014M04L11AI02242**

Amount of Each Receipt this Period  
**400.00**

Full Name (Last, First, Middle Initial)  
**C. MRS. JEANETTE L. GLEESON**

Mailing Address 2106 OLD BAINBRIDGE ROAD

City Tallahassee State FL Zip Code 32303-3905

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : 2014M04L11AI02243**

Amount of Each Receipt this Period  
**75.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **575.00**

**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 853 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JEANETTE L. GLEESON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2106 OLD BAINBRIDGE ROAD  
 City TALLAHASSEE State FL Zip Code 32303-3905  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02244**  
 Amount of Each Receipt this Period 75.00

**B. MRS. ELIZABETH A. GLENDINNING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30 BOKUM ROAD  
 UNI 158  
 City ESSEX State CT Zip Code 06426-1510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 331.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02245**  
 Amount of Each Receipt this Period 331.00

**C. MR. AARLYN L. R. GLENN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21351 CANEA  
 City MISSION VIEJO State CA Zip Code 92692-4992  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02246**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 506.00  
**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 854 OF 2949
	<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	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT C. GLENN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13240 N. TATUM BLVD.  
 APARTMENT 204  
 City PHOENIX State AZ Zip Code 85032-6474  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI02247**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. RICHARD GLIELMI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2108 FRED III JR. COURT  
 City PEAR RIVER State NY Zip Code 10965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 371.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02248**  
 Amount of Each Receipt this Period  
 110.00

**C. MR. RICHARD GLIELMI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2108 FRED III JR. COURT  
 City PEAR RIVER State NY Zip Code 10965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 371.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02249**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 185.00  
**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 855 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD GLIELMI**  
Full Name (Last, First, Middle Initial)

Mailing Address 2108 FRED III JR. COURT

City PEAR RIVER	State NY	Zip Code 10965
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
371.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI02250**

Amount of Each Receipt this Period  
101.00

**B. MR. EUGEN GLUCK**  
Full Name (Last, First, Middle Initial)

Mailing Address 99 TENNIS PLACE

City FOREST HILLS	State NY	Zip Code 11375-5161
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer E. GLUCK CORPORATION	Occupation PRESIDENT/C.E.O.
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI02251**

Amount of Each Receipt this Period  
1000.00

**C. MR. THOMAS C. GOAD**  
Full Name (Last, First, Middle Initial)

Mailing Address 1840 REDDING ROAD

City BIRMINGHAM	State MI	Zip Code 48009-1054
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
640.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI02252**

Amount of Each Receipt this Period  
440.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1541.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 856 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BERYL GODDARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4188 SW TOMMY ARMOUR LANE  
 City REDMOND State OR Zip Code 97756-0319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02253**  
 Amount of Each Receipt this Period  
 60.00

**B. MRS. BERYL GODDARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4188 SW TOMMY ARMOUR LANE  
 City REDMOND State OR Zip Code 97756-0319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02254**  
 Amount of Each Receipt this Period  
 25.00

**C. MRS. BERYL GODDARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4188 SW TOMMY ARMOUR LANE  
 City REDMOND State OR Zip Code 97756-0319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02255**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 135.00  
**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 857 OF 2949
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PETER GODFREY**  
Full Name (Last, First, Middle Initial)

Mailing Address 74 PASTURE LANE  
APARTMENT 319

City BRYN MAWR State PA Zip Code 19010-1776

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
321.00

Date of Receipt  
03 / 14 / 2014  
Transaction ID : 2014M04L11AI02256

Amount of Each Receipt this Period  
120.00

**B. MR. PETER GODFREY**  
Full Name (Last, First, Middle Initial)

Mailing Address 74 PASTURE LANE  
APARTMENT 319

City BRYN MAWR State PA Zip Code 19010-1776

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
321.00

Date of Receipt  
03 / 24 / 2014  
Transaction ID : 2014M04L11AI02257

Amount of Each Receipt this Period  
101.00

**C. MR. THOMAS N. GODFREY**  
Full Name (Last, First, Middle Initial)

Mailing Address 950 COUNTY ROAD QQ  
APARTMENT 152

City WAUPACA State WI Zip Code 54981-8279

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
03 / 10 / 2014  
Transaction ID : 2014M04L11AI02258

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 341.00

**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 858 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD R. GOEDEKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1209 TURNBERRY RIDGE COURT  
 City State Zip Code  
 CHESTERFIELD MO 63005-4230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02259**  
 Amount of Each Receipt this Period  
 1.00

**B. DR. RONALD E. GOELZER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 391  
 City State Zip Code  
 EL CAMPO TX 77437-0391  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DIAG. & SURG. CLINIC P. A. RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02260**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. LYNDA GOETZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4948 OAK ISLAND DRIVE  
 City State Zip Code  
 ORLSNDO FL 32809-3548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02261**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 601.00  
**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 859 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. WILLIAM GOFF</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI02262</b>
Mailing Address 1705 WASHINGTON AVENUE		Amount of Each Receipt this Period 500.00
City PARKERSBURG	State WV	Zip Code 26101-3517
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. MR. DANIEL O. GOFORTH</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI02263</b>
Mailing Address 2 PINEWOLD 4900 WOODWAY STE 750		Amount of Each Receipt this Period 300.00
City HOUSTON	State TX	Zip Code 77056-1883
FEC ID number of contributing federal political committee. C		
Name of Employer GOFORTH EASTERLING LLP	Occupation LAWYER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>C. MR. ROBERT D. GOIN</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI02264</b>
Mailing Address 2914 TAKENA STREET SW		Amount of Each Receipt this Period 275.00
City ALBANY	State OR	Zip Code 97321-3423
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1075.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 860 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOSEPH V. GOLDBACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 908 INNERGARY PLACE  
 City VALRICO State FL Zip Code 33594-4169  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: BROOKS & AMADEN, INC. Occupation: PROFESSIONAL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt: 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02265**  
 Amount of Each Receipt this Period: 110.00

**B. MR. JOSEPH V. GOLDBACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 908 INNERGARY PLACE  
 City VALRICO State FL Zip Code 33594-4169  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: BROOKS & AMADEN, INC. Occupation: PROFESSIONAL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt: 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02266**  
 Amount of Each Receipt this Period: 126.00

**C. MR. STEVEN GOLDFARB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 328 WAYCLIFFE DRIVE N.  
 City WAYZATA State MN Zip Code 55391-1390  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: SELF-EMPLOYED Occupation: INVESTMENT BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02267**  
 Amount of Each Receipt this Period: 400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	636.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 861 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY ALICE GOLDNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14613 WATERFRONT ROAD  
 City State Zip Code  
 EDMOND OK 73013-2427  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02268**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. WALTER S. GOMMERMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 GALLEON COURT  
 City State Zip Code  
 WAKEFIELD RI 02879-5427  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ECKERD CORPORATION MANAGEMENT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02269**  
 Amount of Each Receipt this Period  
 225.00

**C. MR. LAURIE G. GONTHIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 245 EAST SHORE ROAD  
 City State Zip Code  
 MORRIS CT 06763-1317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MERRILL LYNCH FINANCIAL ADVISOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02270**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 775.00  
**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 862 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LEONARD L. GONZALES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 42066 FREMONT PRESERVE SQUARE  
 City State Zip Code  
 STONE RIDGE VA 20105-2979  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 POHANKA ACURA GENERAL MANAGER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02271**  
 Amount of Each Receipt this Period  
 231.00

**B. MS. ELENA A. GONZALEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2920 NW 18TH AVENUE  
 APARTMENT 2F  
 City State Zip Code  
 MIAMI FL 33142-6001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 555.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02272**  
 Amount of Each Receipt this Period  
 15.00

**C. MS. ELENA A. GONZALEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2920 NW 18TH AVENUE  
 APARTMENT 2F  
 City State Zip Code  
 MIAMI FL 33142-6001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 555.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02273**  
 Amount of Each Receipt this Period  
 40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 286.00  
**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 863 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ELENA A. GONZALEZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 2920 NW 18TH AVENUE  
APARTMENT 2F

City MIAMI State FL Zip Code 33142-6001

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
555.00

Date of Receipt  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02274**

Amount of Each Receipt this Period  
40.00

**B. MS. ELENA A. GONZALEZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 2920 NW 18TH AVENUE  
APARTMENT 2F

City MIAMI State FL Zip Code 33142-6001

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
555.00

Date of Receipt  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02275**

Amount of Each Receipt this Period  
50.00

**C. MR. CURTIS GOOD**  
Full Name (Last, First, Middle Initial)

Mailing Address 2063 COMMODORE ROAD

City NEWPORT BEACH State CA Zip Code 92660-4307

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02276**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 340.00

**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 864 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD GOOD**  
Full Name (Last, First, Middle Initial)

Mailing Address 7802 MULBERRY LANE

City NAPLES State FL Zip Code 34114-9444

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **670.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02277**

Amount of Each Receipt this Period  
**90.00**

**B. MR. RICHARD GOOD**  
Full Name (Last, First, Middle Initial)

Mailing Address 7802 MULBERRY LANE

City NAPLES State FL Zip Code 34114-9444

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **670.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02278**

Amount of Each Receipt this Period  
**100.00**

**C. MR. STEPHEN P. GOODALL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1358 14TH STREET W.

City DICKINSON State ND Zip Code 58601-2867

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02279**

Amount of Each Receipt this Period  
**120.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>310.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 865 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL GOODHART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2251 LAKE VISTA DRIVE  
 City State Zip Code  
 CHRISTIANSBURG VA 24073-4292  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 C21 RICE REALTY REALTOR  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02280**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. CORWIN E. GOODMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 232 RED MAPLE AVENUE  
 City State Zip Code  
 CRESCO IA 52136-1071  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 246.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02281**  
 Amount of Each Receipt this Period  
 56.00

**C. MR. PAUL P. GOODMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 99 S. SERVICE ROAD  
 APARTMENT 402  
 City State Zip Code  
 NEW HYDE PARK NY 11040-1071  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02282**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 456.00  
**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 866 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. PAUL P. GOODMAN</b>		Date of Receipt
Mailing Address 99 S. SERVICE ROAD APARTMENT 402		M M M / D D D / Y Y Y Y Y Y 03 / 13 / 2014
City NEW HYDE PARK	State NY	Zip Code 11040-1071
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 2014M04L11AI02283</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. MR. PAUL P. GOODMAN</b>		Date of Receipt
Mailing Address 99 S. SERVICE ROAD APARTMENT 402		M M M / D D D / Y Y Y Y Y Y 03 / 21 / 2014
City NEW HYDE PARK	State NY	Zip Code 11040-1071
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 2014M04L11AI02284</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. MR. REECE GOODMAN</b>		Date of Receipt
Mailing Address 12019 OAK CLUSTER E		M M M / D D D / Y Y Y Y Y Y 03 / 05 / 2014
City MAGNOLIA	State TX	Zip Code 77354-4978
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 2014M04L11AI02285</b>
Name of Employer PRESTON EXPLORATION, LLC		Amount of Each Receipt this Period
Occupation C.P.A.		150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 867 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT GOODMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4400 GLEN IRIS BLVD.  
 City SHREVEPORT State LA Zip Code 71106-1408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02286**  
 Amount of Each Receipt this Period  
 111.00

**B. MS. ANNE MCKENZIE GOODNIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 ASH COURT  
 City LAFAYETTE State IN Zip Code 47905-3902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02287**  
 Amount of Each Receipt this Period  
 50.00

**C. MS. ANNE MCKENZIE GOODNIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 ASH COURT  
 City LAFAYETTE State IN Zip Code 47905-3902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02288**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 261.00  
**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 868 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DOROTHY G. GOODNOUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1220 NANCY ANNA AVENUE N.W.  
 City MASSILLON State OH Zip Code 44646-9399  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **251.00**

Date of Receipt: **03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI02289**  
 Amount of Each Receipt this Period: **100.00**

**B. MRS. DOROTHY G. GOODNOUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1220 NANCY ANNA AVENUE N.W.  
 City MASSILLON State OH Zip Code 44646-9399  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **251.00**

Date of Receipt: **03 / 28 / 2014**  
**Transaction ID : 2014M04L11AI02290**  
 Amount of Each Receipt this Period: **51.00**

**C. MR. EDWARD GOODRICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6224 HILLSBORO ROAD  
 City NASHVILLE State TN Zip Code 37215-5502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **N/A** Occupation: **NONE**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt: **03 / 27 / 2014**  
**Transaction ID : 2014M04L11AI02291**  
 Amount of Each Receipt this Period: **250.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **401.00**  
**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 869 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. SANDRA E. GOODSTEIN</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI02292</b>
Mailing Address 1770 MELMAR ROAD		Amount of Each Receipt this Period 500.00
City HUNTINGDON VALLEY	State PA	Zip Code 19006-7981
FEC ID number of contributing federal political committee.	C	
Name of Employer GOODSTEIN & ASSOCIATES, L.L.C.	Occupation FINANCIAL ADVISOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. MS. JOAN R. GOODWIN</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 12 / 2014 <b>Transaction ID : 2014M04L11AI02293</b>
Mailing Address 725 9TH AVENUE APARTMENT 909		Amount of Each Receipt this Period 100.00
City SEATTLE	State WA	Zip Code 98104-2065
FEC ID number of contributing federal political committee.	C	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. MS. JOAN R. GOODWIN</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 12 / 2014 <b>Transaction ID : 2014M04L11AI02294</b>
Mailing Address 725 9TH AVENUE APARTMENT 909		Amount of Each Receipt this Period 100.00
City SEATTLE	State WA	Zip Code 98104-2065
FEC ID number of contributing federal political committee.	C	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 870 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JOAN R. GOODWIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 725 9TH AVENUE  
 APARTMENT 909  
 City SEATTLE State WA Zip Code 98104-2065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02295**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. CHARLES F. GORDER SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5526 TOYON ROAD  
 City SAN DIEGO State CA Zip Code 92115-1020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02296**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. CHARLES F. GORDER SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5526 TOYON ROAD  
 City SAN DIEGO State CA Zip Code 92115-1020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02297**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 871 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES F. GORDER SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5526 TOYON ROAD  
 City SAN DIEGO State CA Zip Code 92115-1020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02298**  
 Amount of Each Receipt this Period 100.00

**B. MR. BRUCE GORDON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15 WIMBLEDON CT.  
 City JERICHO State NY Zip Code 11753-2822  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02299**  
 Amount of Each Receipt this Period 50.00

**C. MRS. LYNNE M. GORDON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 915 RIVERVIEW PLACE  
 City CINCINNATI State OH Zip Code 45202-1622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ARTIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02300**  
 Amount of Each Receipt this Period 100.00

**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: PAGE 872 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL S. GORDON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 120 IRVINE COVE PLACE  
 City LAGUNA BEACH State CA Zip Code 92651-1042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02301**  
 Amount of Each Receipt this Period 1000.00

**B. MR. RICHARD GORDON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2121 KIRBY DRIVE UNIT 25  
 City HOUSTON State TX Zip Code 77019-6064  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JUNIPER CAPITAL, LP Occupation INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1001.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02302**  
 Amount of Each Receipt this Period 1001.00

**C. MR. TREVOR L. GORDON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 NORMAN PLACE  
 City GREENVILLE State SC Zip Code 29615-6077  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02303**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2501.00  
**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 873 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. JAMES C. GORMAN</b>		Date of Receipt MM / DD / YYYY 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI02304</b>
Mailing Address P.O. BOX 2599		Amount of Each Receipt this Period 1000.00
City MANSFIELD	State OH	Zip Code 44906-0599
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000.00	

Full Name (Last, First, Middle Initial) <b>B. MR. STEFAN JAN-FILIP GORZULA</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI02305</b>
Mailing Address 7724 GLENISTER DRIVE		Amount of Each Receipt this Period 90.00
City SPRINGFIELD	State VA	Zip Code 22152-2004
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation BIOLOGIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. D'AWN GOSDIN</b>		Date of Receipt MM / DD / YYYY 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI02306</b>
Mailing Address 1605 CROCKETT CIRCLE		Amount of Each Receipt this Period 1.00
City IRVING	State TX	Zip Code 75038-6222
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1091.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 874 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN A. GOSE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5500 S.W. SPOKANE STREET  
 City SEATTLE State WA Zip Code 98116-3118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02307**  
 Amount of Each Receipt this Period  
 60.00

**B. MR. HAROLD E. GOSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9927 ENSLEY LANE  
 City SHAWNEE MISSION State KS Zip Code 66206-2460  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02308**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. HAROLD E. GOSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9927 ENSLEY LANE  
 City SHAWNEE MISSION State KS Zip Code 66206-2460  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02309**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	230.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 875 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. FLOYD D. GOTTWALD JR.</b>		Date of Receipt
Mailing Address 300 HERNDON RD		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code
RICHMOND	VA	23229-8214
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : <b>2014M04L11AI02310</b>
RETIRED	RETIRED	
Receipt For:		Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="32400.00"/>
<input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		<input type="text" value="32400.00"/>

Full Name (Last, First, Middle Initial) <b>B. MS. KATHY GOUDIE</b>		Date of Receipt
Mailing Address 1312 S. 298TH STREET		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
ELMWOOD	NE	68349-2916
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : <b>2014M04L11AI02311</b>
ELMWOOD HURDOCK PUBLIC SCHOOL	KITCHEN SUPERVISOR	
Receipt For:		Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="200.00"/>
<input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		<input type="text" value="300.00"/>

Full Name (Last, First, Middle Initial) <b>C. MR. ELDON GOULD</b>		Date of Receipt
Mailing Address 49 W. 924 PERRY ROAD		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
MAPLE PARK	IL	60151
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : <b>2014M04L11AI02312</b>
FARMER/RANCHER	FARMER/RANCHER	
Receipt For:		Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="110.00"/>
<input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼		<input type="text" value="220.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="32710.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 876 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JULIE GRABILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10803 LACABREAH LANE  
 City FORT WAYNE State IN Zip Code 46845-2134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GRABILL PAINTING AND DRYWALL Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02313**  
 Amount of Each Receipt this Period  
**250.00**

**B. MR. JOHN GRAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 850 MELODY ROAD  
 City LAKE FOREST State IL Zip Code 60045-2044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02314**  
 Amount of Each Receipt this Period  
**1650.00**

**C. MRS. CORRIE J. GRADO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1137 BLUEHILL CREEK DRIVE  
 City MARCO ISLAND State FL Zip Code 34145-1704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02315**  
 Amount of Each Receipt this Period  
**200.00**

**SUBTOTAL** of Receipts This Page (optional)..... **2100.00**  
**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 877 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARJORIE GRAF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22669 AUDRAIN ROAD 812  
 City MEXICO State MO Zip Code 65265-6510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GRAF AND SONS Occupation OWNER  
 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  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02316**  
 Amount of Each Receipt this Period  
 200.00

**B. MRS. MARJORIE GRAF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22669 AUDRAIN ROAD 812  
 City MEXICO State MO Zip Code 65265-6510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GRAF AND SONS Occupation OWNER  
 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  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02317**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. SAMMIE A. GRAFFEO JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5981 NW 81ST TERRACE  
 City PARKLAND State FL Zip Code 33067-5012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02318**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 878 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SAMMIE A. GRAFFEO JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5981 NW 81ST TERRACE  
 City State Zip Code  
 PARKLAND FL 33067-5012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 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  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02319**  
 Amount of Each Receipt this Period  
 50.00

**B. MRS. ANN D. GRAHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 HOPE AVENUE  
 City State Zip Code  
 NEWBURYPORT MA 01950-3619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 W. GRAHAM ASSOCIATES ACCOUNTANT  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI02320**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. G. KENNETH GRAHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 174 WASHINGTON STREET  
 PENTHOUSE J.  
 City State Zip Code  
 JERSEY CITY NJ 07302-6502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02321**  
 Amount of Each Receipt this Period  
 100.00

**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 879 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. G. KENNETH GRAHAM</b>		Date of Receipt
Mailing Address 174 WASHINGTON STREET PENTHOUSE J.		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : 2014M04L11AI02322</b>
JERSEY CITY	NJ	Amount of Each Receipt this Period
Zip Code		<input type="text" value="100.00"/>
07302-6502		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="201.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. G. KENNETH GRAHAM</b>		Date of Receipt
Mailing Address 174 WASHINGTON STREET PENTHOUSE J.		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : 2014M04L11AI02323</b>
JERSEY CITY	NJ	Amount of Each Receipt this Period
Zip Code		<input type="text" value="1.00"/>
07302-6502		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="201.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MS. MARJORIE GRAHAM</b>		Date of Receipt
Mailing Address 100 TIMBERLEAF CIRCLE		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : 2014M04L11AI02324</b>
ALABASTER	AL	Amount of Each Receipt this Period
Zip Code		<input type="text" value="176.00"/>
35007-4129		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="476.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="277.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 880 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PHYLLIS A. GRAHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 288  
 City PUTNEY State VT Zip Code 05346-0288  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TREASURER Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02325**  
 Amount of Each Receipt this Period  
 205.00

**B. MRS. ROSE MARIE GRALIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4255 GULF SHORE BLVD. N.  
 City NAPLES State FL Zip Code 34103-2225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02326**  
 Amount of Each Receipt this Period  
 500.00

**C. MRS. LENORA A. GRANBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 PRINCESS LANE  
 City CLEMSON State SC Zip Code 29631-2119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02327**  
 Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 815.00  
**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 881 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES E. GRANITO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11421 GOLDEN EAGLE COURT  
 City State Zip Code  
 NAPLES FL 34120-4331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INTERNATIONAL PRODUCTS CORPORATION CO EXECUTIVE OFFICER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02328**  
 Amount of Each Receipt this Period  
 200.00

**B. MRS. NORMA GRANT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 W. 26TH STREET  
 City State Zip Code  
 FARMINGTON NM 87401-3308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02329**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. RONALD GRANT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2503 DEANIE LANE  
 City State Zip Code  
 BOSSIER CITY LA 71111-5901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02330**  
 Amount of Each Receipt this Period  
 215.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 416.00  
**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 882 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ALYSON GRASSO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 311 W. BROADWAY  
 APARTMENT 7E  
 City NEW YORK State NY Zip Code 10013-3058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt: 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02331**  
 Amount of Each Receipt this Period: 5000.00

**B. MR. JAMES B. GRAVES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 822 RIVER ROAD  
 City MONTGOMERY State TX Zip Code 77356-5553  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 366.00

Date of Receipt: 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02332**  
 Amount of Each Receipt this Period: 366.00

**C. MR. WILLIAM E. GRAVES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 950  
 City SENECA State IL Zip Code 61360-0950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 401.00

Date of Receipt: 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02333**  
 Amount of Each Receipt this Period: 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5367.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 883 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. AMBASSADOR C. BOYDEN GRAY ESQ.**  
Full Name (Last, First, Middle Initial)

Mailing Address 1627 I STREET, NW  
SUITE 950

City WASHINGTON State DC Zip Code 20006-4039

FEC ID number of contributing federal political committee. **C**

Name of Employer WILMER, CUTLER & PICKERING Occupation PARTNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
9800.00

Date of Receipt  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02334**

Amount of Each Receipt this Period  
9800.00

**B. MS. CHRISTINE J. GRAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 240 E. 47TH STREET  
APARTMENT 31E

City NEW YORK State NY Zip Code 10017-2138

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02335**

Amount of Each Receipt this Period  
105.00

**C. MR. HORACE A. GRAY III**  
Full Name (Last, First, Middle Initial)

Mailing Address 5004 MONUMENT AVENUE  
SUITE 200

City RICHMOND State VA Zip Code 23230-3629

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02336**

Amount of Each Receipt this Period  
600.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10505.00

**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 884 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. JOAN B. GRAY**

Mailing Address P.O. BOX 832

City State Zip Code  
LAKE WALES FL 33859-0832

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02337**

Amount of Each Receipt this Period  
550.00

Full Name (Last, First, Middle Initial)  
**B. LAUREL LEE GRAY**

Mailing Address 6179 CORONADO DR

City State Zip Code  
CASPER WY 82609-4310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02338**

Amount of Each Receipt this Period  
150.00

Full Name (Last, First, Middle Initial)  
**C. LAUREL LEE GRAY**

Mailing Address 6179 CORONADO DR

City State Zip Code  
CASPER WY 82609-4310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02339**

Amount of Each Receipt this Period  
75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 775.00

**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 885 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. WILLIAM W. GREAVES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8851 N BAYSIDE DR  
 8851 N BAYSIDE DR  
 City BAYSIDE State WI Zip Code 53217-1910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ABPM Occupation PHYSICIAN  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02340**  
 Amount of Each Receipt this Period  
 50.00

**B. DR. WILLIAM W. GREAVES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8851 N BAYSIDE DR  
 8851 N BAYSIDE DR  
 City BAYSIDE State WI Zip Code 53217-1910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ABPM Occupation PHYSICIAN  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02341**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. EARL J. GREEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 314 PIEDMONT ROAD  
 City CHARLESTON State WV Zip Code 25301-1021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GREEN'S FEED & SEED, INC. Occupation FEED & SEED MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02342**  
 Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 260.00  
**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 886 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE A. GREEN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2524 COSTERO MAGESTUOSO  
 City SAN CLEMENTE State CA Zip Code 92673-6424  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02343**  
 Amount of Each Receipt this Period 120.00

**B. MR. GEORGE A. GREEN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2524 COSTERO MAGESTUOSO  
 City SAN CLEMENTE State CA Zip Code 92673-6424  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02344**  
 Amount of Each Receipt this Period 100.00

**C. MRS. JOANNE L. GREEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 317 N. HAGADORN ROAD  
 City EAST LANSING State MI Zip Code 48823-3642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02345**  
 Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 245.00  
**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 887 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PAUL T. GREEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 4278 BRAMLETT CHURCH ROAD

City	State	Zip Code
GRAY COURT	SC	29645-3614

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
361.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02346**

Amount of Each Receipt this Period  
 120.00

**B. MR. PAUL T. GREEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 4278 BRAMLETT CHURCH ROAD

City	State	Zip Code
GRAY COURT	SC	29645-3614

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
361.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02347**

Amount of Each Receipt this Period  
 121.00

**C. MR. DALE H. GREENE**  
Full Name (Last, First, Middle Initial)

Mailing Address 114 ABBEY LANE

City	State	Zip Code
TELFORD	PA	18969-2168

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02348**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	291.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 888 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DALE H. GREENE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 114 ABBEY LANE  
 City TELFORD State PA Zip Code 18969-2168  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02349**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. DALE H. GREENE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 114 ABBEY LANE  
 City TELFORD State PA Zip Code 18969-2168  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02350**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. JOE A. GREENE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 131 FEDERAL DRIVE  
 City FREDERICKSBURG State VA Zip Code 22405-3101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MID-ATLANTIC FOAM Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02351**  
 Amount of Each Receipt this Period  
 225.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 276.00  
**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 889 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BARBARA GREENING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2630 W. LAKE SHORE DRIVE  
 City SPRINGFIELD State IL Zip Code 62712-9523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **201.00**

Date of Receipt: **03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI02352**  
 Amount of Each Receipt this Period: **50.00**

**B. MRS. BARBARA GREENING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2630 W. LAKE SHORE DRIVE  
 City SPRINGFIELD State IL Zip Code 62712-9523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **201.00**

Date of Receipt: **03 / 21 / 2014**  
**Transaction ID : 2014M04L11AI02353**  
 Amount of Each Receipt this Period: **50.00**

**C. MRS. BARBARA GREENING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2630 W. LAKE SHORE DRIVE  
 City SPRINGFIELD State IL Zip Code 62712-9523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **201.00**

Date of Receipt: **03 / 28 / 2014**  
**Transaction ID : 2014M04L11AI02354**  
 Amount of Each Receipt this Period: **1.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>101.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 890 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JON GREENWOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1087 STATE HIGHWAY 310  
 City CANTON State NY Zip Code 13617-3378  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02355**  
 Amount of Each Receipt this Period 500.00

**B. MR. KENT A. GREER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4622 W. KELLY PARK ROAD  
 City APOPKA State FL Zip Code 32712-5135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RIVEROAKS ANIMAL HOSPITAL Occupation D.O.M.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02356**  
 Amount of Each Receipt this Period 200.00

**C. MR. KENT A. GREER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4622 W. KELLY PARK ROAD  
 City APOPKA State FL Zip Code 32712-5135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RIVEROAKS ANIMAL HOSPITAL Occupation D.O.M.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02357**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00  
**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 891 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ELIZABETH GREESON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2605 E. LOMA VISTA AVENUE  
 City VICTORIA State TX Zip Code 77901-4432  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ATZENHOFFER Occupation PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1410.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02358**  
 Amount of Each Receipt this Period 400.00

**B. MR. GEORGE GREGG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 521 MANNING ROAD  
 City TARBORO State NC Zip Code 27886  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ALBERMARLE ANIMAL HOSPITAL Occupation VETERINARIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02359**  
 Amount of Each Receipt this Period 100.00

**C. MRS. JANET SHIRLEY GREGORY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9501 KINGSCROFT TERRACE APARTMENT K.  
 City PERRY HALL State MD Zip Code 21128-9456  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02360**  
 Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 525.00  
**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 892 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JANET SHIRLEY GREGORY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9501 KINGSCROFT TERRACE  
 APARTMENT K.  
 City PERRY HALL State MD Zip Code 21128-9456  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02361**  
 Amount of Each Receipt this Period  
 25.00

**B. MRS. JANET SHIRLEY GREGORY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9501 KINGSCROFT TERRACE  
 APARTMENT K.  
 City PERRY HALL State MD Zip Code 21128-9456  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02362**  
 Amount of Each Receipt this Period  
 25.00

**C. MR. JOHN O. GREGORY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9410 PRINCE WILLIAM STREET  
 City MANASSAS State VA Zip Code 20110-5666  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GREGORY CONSTRUCTION CO., INC. Occupation CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02363**  
 Amount of Each Receipt this Period  
 5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 55.00  
**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 893 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLARD B. GREGORY**  
Full Name (Last, First, Middle Initial)

Mailing Address 10406 MORADA DRIVE

City ORANGE State CA Zip Code 92869-1509

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **341.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : 2014M04L11AI02364**

Amount of Each Receipt this Period  
**1.00**

**B. MR. WILLIAM D. GREGORY**  
Full Name (Last, First, Middle Initial)

Mailing Address 1009 S. HENRY STREET

City BAY CITY State MI Zip Code 48706-5007

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 05 / 2014**

**Transaction ID : 2014M04L11AI02365**

Amount of Each Receipt this Period  
**100.00**

**C. MR. GARY GRETZINGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 10406 CHELSEA MANORS COURT

City GREAT FALLS State VA Zip Code 22066-3232

FEC ID number of contributing federal political committee. **C**

Name of Employer ENCLOS CORPORATION Occupation VICE PRESIDENT FIELD OPERATIONS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 13 / 2014**

**Transaction ID : 2014M04L11AI02366**

Amount of Each Receipt this Period  
**50.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>151.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 894 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY GREYNOLDS**  
Full Name (Last, First, Middle Initial)

Mailing Address 897 BRIDLEWOOD DRIVE

City COPLEY State OH Zip Code 44321-1501

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02367**

Amount of Each Receipt this Period  
 201.00

**B. MR. VLADIMIR GRIBOVSKY**  
Full Name (Last, First, Middle Initial)

Mailing Address 6301 BAY RIDGE ROAD

City MOUND State MN Zip Code 55364-9523

FEC ID number of contributing federal political committee. **C**

Name of Employer OWNER Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02368**

Amount of Each Receipt this Period  
 500.00

**C. MR. M. LEE GRIFFEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 6317 HORSEMANS CANYON DRIVE

City WALNUT CREEK State CA Zip Code 94595-4308

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 421.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02369**

Amount of Each Receipt this Period  
 301.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1002.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 895 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. BARBARA A. GRIFFIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6136 BRITTANY AVENUE  
 City NEWARK State CA Zip Code 94560-1715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer C. H. W. Occupation DIRECTOR PATENT FINANCIAL SERVICES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02370**  
 Amount of Each Receipt this Period 110.00

**B. MR. CAMPBELL A. GRIFFIN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1000 UPTOWN PARK BLVD. APARTMENT 201  
 City HOUSTON State TX Zip Code 77056-3249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02371**  
 Amount of Each Receipt this Period 180.00

**C. MR. F. O'NEIL GRIFFIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 291910  
 City KERRVILLE State TX Zip Code 78029-1910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02372**  
 Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1290.00  
**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 896 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. EILEEN H. GRIFFITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7421 TOMCRIS COURT  
 City Springfield State VA Zip Code 22153-1355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 556.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02373**  
 Amount of Each Receipt this Period 305.00

**B. MRS. EILEEN H. GRIFFITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7421 TOMCRIS COURT  
 City Springfield State VA Zip Code 22153-1355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 556.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02374**  
 Amount of Each Receipt this Period 251.00

**C. MS. JEANNE LOUISE GRIFFITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 308 PERRIN AVENUE APARTMENT 4  
 City LAFAYETTE State IN Zip Code 47904-2687  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 811.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02375**  
 Amount of Each Receipt this Period 750.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1306.00  
**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 897 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JEANNE LOUISE GRIFFITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 308 PERRIN AVENUE  
 APARTMENT 4  
 City LAFAYETTE State IN Zip Code 47904-2687  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 811.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02376**  
 Amount of Each Receipt this Period  
 1.00

**B. RICHARD GRIFFITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3417 MILINE STREET  
 City HOUSTON State TX Zip Code 77702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LLC Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02377**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. TIM T. GRIFFY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 209 LONG CANYON COURT  
 City RICHARDSON State TX Zip Code 75080-2669  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ERNST & YOUNG LLP Occupation C.P.A.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02378**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1001.00  
**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 898 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. H. JAMES GRIGGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 410  
 3282 STEVENSON DRIVE  
 City PEBBLE BEACH State CA Zip Code 93953-0410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02379**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. KRISTIAN ERIK GRIMLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 650 SILVER SPUR DRIVE  
 City WEATHERFORD State TX Zip Code 76087-6483  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02380**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. GLENN GRINDLINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 E. 85TH STREET  
 APARTMENT 16J  
 City NEW YORK State NY Zip Code 10028-6323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FOX ROTHSCHILD LLP Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02381**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 899 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MARILYN F. GRINWIS GRAY</b>		Date of Receipt
Mailing Address 1808 NEWS DRIVE		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
WILMINGTON	NC	28405
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI02382</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MRS. MAXINE GRIZZELL</b>		Date of Receipt
Mailing Address 1501 SILVER FALLS ROAD APARTMENT 1		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code
LONGVIEW	TX	75604-2277
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI02383</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
HOMEMAKER	HOMEMAKER	<input type="text" value="120.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="871.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MRS. MAXINE GRIZZELL</b>		Date of Receipt
Mailing Address 1501 SILVER FALLS ROAD APARTMENT 1		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
LONGVIEW	TX	75604-2277
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI02384</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
HOMEMAKER	HOMEMAKER	<input type="text" value="35.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="871.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="655.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 900 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MAXINE GRIZZELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1501 SILVER FALLS ROAD  
 APARTMENT 1  
 City LONGVIEW State TX Zip Code 75604-2277  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **871.00**

Date of Receipt: **03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI02385**  
 Amount of Each Receipt this Period: **50.00**

**B. MRS. MAXINE GRIZZELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1501 SILVER FALLS ROAD  
 APARTMENT 1  
 City LONGVIEW State TX Zip Code 75604-2277  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **871.00**

Date of Receipt: **03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI02386**  
 Amount of Each Receipt this Period: **50.00**

**C. MRS. MAXINE GRIZZELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1501 SILVER FALLS ROAD  
 APARTMENT 1  
 City LONGVIEW State TX Zip Code 75604-2277  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **871.00**

Date of Receipt: **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI02387**  
 Amount of Each Receipt this Period: **121.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **221.00**  
**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 901 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RUFUS S. GROFF**  
Full Name (Last, First, Middle Initial)

Mailing Address 2733 HOSSLER ROAD

City MANHEIM State PA Zip Code 17545-9663

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 227.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI02388**

Amount of Each Receipt this Period  
 227.00

**B. MR. ROY J. GROGAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 12 FOSSIL HILL ROAD

City WEATHERFORD State TX Zip Code 76087-8626

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02389**

Amount of Each Receipt this Period  
 1000.00

**C. MR. ROY J. GROGAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 12 FOSSIL HILL ROAD

City WEATHERFORD State TX Zip Code 76087-8626

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02390**

Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1228.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 902 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GLENN T. GRONNERUD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26020 S.E. 38TH COURT  
 City ISSAQUAH State WA Zip Code 98029-7733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WINDSOR CONSTRUCTION COMPANY Occupation CONSTRUCTION CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02391**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. GLENN T. GRONNERUD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26020 S.E. 38TH COURT  
 City ISSAQUAH State WA Zip Code 98029-7733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WINDSOR CONSTRUCTION COMPANY Occupation CONSTRUCTION CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02392**  
 Amount of Each Receipt this Period  
 1.00

**C. MRS. JOSEPHINE GROOTHUIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2389 INTERLACKIN CIRCLE N.W.  
 City CLEVELAND State TN Zip Code 37312-2235  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02393**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	401.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 903 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. DR. GARY G. GROSNER**

Mailing Address 5486 VIA MARINA

City State Zip Code  
WILLIAMSVILLE NY 14221-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
GENERAL PHYSICIANS SUB II, PLLC PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02394**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. JACK GROSS**

Mailing Address 1990 PRESIDENTIAL DRIVE

City State Zip Code  
WHITEHALL PA 18052-4143

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02395**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MRS. BIRGIT GROVE**

Mailing Address 3505 S. OCEAN BLVD.  
APARTMENT 9S

City State Zip Code  
HIGHLAND BEACH FL 33487-3332

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02396**

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 875.00

**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 904 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD GROVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 312 OLIVER STREET  
 APARTMENT 2  
 City CORYDON State IN Zip Code 47112-5381  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 511.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI02397**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. DONALD GROVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 312 OLIVER STREET  
 APARTMENT 2  
 City CORYDON State IN Zip Code 47112-5381  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 511.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02398**  
 Amount of Each Receipt this Period  
 210.00

**C. MR. DONALD GROVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 312 OLIVER STREET  
 APARTMENT 2  
 City CORYDON State IN Zip Code 47112-5381  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 511.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02399**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	411.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 905 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SANDRA GRUBB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 258 SUTTLES RD  
 City WINCHESTER State IL Zip Code 62694-8727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02400**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. SANDRA GRUBB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 258 SUTTLES RD  
 City WINCHESTER State IL Zip Code 62694-8727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02401**  
 Amount of Each Receipt this Period  
 51.00

**C. MRS. SANDRA GRUBB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 258 SUTTLES RD  
 City WINCHESTER State IL Zip Code 62694-8727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02402**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 176.00  
**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 906 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. CINDY GRUDEN**

Mailing Address 709 GUI SANDO DE AVILA

City State Zip Code  
TAMPA FL 33613-5204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02403**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. IVAN GRUETZMACHER**

Mailing Address E8791 GRUETZMACHER ROAD

City State Zip Code  
NEW LONDON WI 54961-8764

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED FARMER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02404**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MR. FRANK GRUMET**

Mailing Address 825 SAN FRANCISCO COURT

City State Zip Code  
STANFORD CA 94305-1021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02405**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00

**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 907 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. ELINORE E. GRUNDLER</b>		Date of Receipt
Mailing Address 777 SPRINGFIELD AVENUE APARTMENT 10		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City SUMMIT	State NJ	Zip Code 07901-2329
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI02406</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="95.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="245.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MRS. ELINORE E. GRUNDLER</b>		Date of Receipt
Mailing Address 777 SPRINGFIELD AVENUE APARTMENT 10		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City SUMMIT	State NJ	Zip Code 07901-2329
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI02407</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="245.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MRS. ELINORE E. GRUNDLER</b>		Date of Receipt
Mailing Address 777 SPRINGFIELD AVENUE APARTMENT 10		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City SUMMIT	State NJ	Zip Code 07901-2329
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI02408</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="245.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="195.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 908 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. S. THOMAS GRUNNAH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W. 6310 HAMMANN ROAD  
 City PLYMOUTH State WI Zip Code 53073-2713  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PRIVATE INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02409**  
 Amount of Each Receipt this Period 50.00

**B. MRS. KAREN GRUNST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11414 S. HAVARD AVENUE  
 City TULSA State OK Zip Code 74137-7806  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02410**  
 Amount of Each Receipt this Period 200.00

**C. MRS. KARON GUBBRUD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2145 S. NORTON AVENUE  
 City SIOUX FALLS State SD Zip Code 57105-3730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02411**  
 Amount of Each Receipt this Period 50.00

**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: PAGE 909 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KARON GUBBRUD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2145 S. NORTON AVENUE  
 City State Zip Code  
 SIOUX FALLS SD 57105-3730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02412**  
 Amount of Each Receipt this Period  
 50.00

**B. MRS. KARON GUBBRUD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2145 S. NORTON AVENUE  
 City State Zip Code  
 SIOUX FALLS SD 57105-3730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02413**  
 Amount of Each Receipt this Period  
 120.00

**C. MRS. KARON GUBBRUD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2145 S. NORTON AVENUE  
 City State Zip Code  
 SIOUX FALLS SD 57105-3730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02414**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 270.00  
**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 910 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KARON GUBBRUD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2145 S. NORTON AVENUE  
 City State Zip Code  
 SIOUX FALLS SD 57105-3730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02415**  
 Amount of Each Receipt this Period  
 45.00

**B. MS. MARILYN GUDE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4110 BURNEY DRIVE  
 City State Zip Code  
 AUSTIN TX 78731-1350  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02416**  
 Amount of Each Receipt this Period  
 110.00

**C. DR. GARLAND K. GUDGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2200 OLD RIVER ROAD  
 City State Zip Code  
 FORTSON GA 31808-2540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED ORTHOPETIC SURGEON  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02417**  
 Amount of Each Receipt this Period  
 375.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	530.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 911 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. LORY GUERRA**

Mailing Address 2127 POPPY DRIVE

City State Zip Code  
BURLINGAME CA 94010-5526

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI02418**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. KAY D. GUILLES**

Mailing Address 340 M. STREET S.W.

City State Zip Code  
WASHINGTON DC 20024-4002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LIBRARY OF CONGRESS LIBRARIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI02419**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**C. MR. KAY D. GUILLES**

Mailing Address 340 M. STREET S.W.

City State Zip Code  
WASHINGTON DC 20024-4002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LIBRARY OF CONGRESS LIBRARIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02420**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 201.00

**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 912 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD E. GULBRANSON JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 114 ENCINO AVENUE  
 City CAMARILLO State CA Zip Code 93010-1721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PROPERTY MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 951.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02421**  
 Amount of Each Receipt this Period  
 401.00

**B. MR. WILSON M. GULICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14 CHAPALA ROAD  
 City SANTA FE State NM Zip Code 87508-2205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02422**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. VICTOR R. GULICKSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1515 LOS MOLINOS WAY  
 City SACRAMENTO State CA Zip Code 95864-2955  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02423**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 601.00  
**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 913 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. VICTOR R. GULICKSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1515 LOS MOLINOS WAY  
 City SACRAMENTO State CA Zip Code 95864-2955  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02424**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. WAYNE B. GULLEDGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1970 QUEENS BLUFF WAY  
 City CLARKSVILLE State TN Zip Code 37043-4860  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CONTRACTOR  
 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  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02425**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. DOROTHY A. GUMMER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5955 OBERLIES WAY  
 City PLAINFIELD State IN Zip Code 46168-7323  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02426**  
 Amount of Each Receipt this Period  
 115.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	240.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 914 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. A. T. GUNAWARDHANE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 638  
 City CLIFTON State IL Zip Code 60927-0638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02427**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. BETH J. GUNTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3452 ROUNDWOOD ROAD  
 City CHAGRIN FALLS State OH Zip Code 44022-6636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02428**  
 Amount of Each Receipt this Period  
 375.00

**C. MR. FREDRIC E. GUSHIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 DONOVAN ROAD  
 City PENNINGTON State NJ Zip Code 08534-5128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SPECTRUM GAMING GROUP Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI02429**  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 625.00  
**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 915 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DAVID C. GUSSE**

Mailing Address 1431 RED BRICK ROAD

City State Zip Code  
DIXON IL 61021-8323

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02430**

Amount of Each Receipt this Period  
101.00

Full Name (Last, First, Middle Initial)  
**B. MR. EDWARD A. GUTHRIE JR.**

Mailing Address 12306 FRANCEL LANE

City State Zip Code  
CYPRESS TX 77429-6039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02431**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MR. ROBERT W. GUTHRIE**

Mailing Address 24245 WILDERNESS OAK  
APARTMENT 1506

City State Zip Code  
SAN ANTONIO TX 78258-7855

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
426.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02432**

Amount of Each Receipt this Period  
40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 641.00

**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 916 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT W. GUTHRIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24245 WILDERNESS OAK  
 APARTMENT 1506  
 City SAN ANTONIO State TX Zip Code 78258-7855  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 426.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02433**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. ROBERT W. GUTHRIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24245 WILDERNESS OAK  
 APARTMENT 1506  
 City SAN ANTONIO State TX Zip Code 78258-7855  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 426.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02434**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. ROBERT W. GUTHRIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24245 WILDERNESS OAK  
 APARTMENT 1506  
 City SAN ANTONIO State TX Zip Code 78258-7855  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 426.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02435**  
 Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 186.00  
**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 917 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. CHARLES A. GWALTNEY</b>		Date of Receipt
Mailing Address P.O. BOX 8130		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
BOSSIER CITY	LA	71113-8130
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
SELF-EMPLOYED	INSURANCE AGENT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="215.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="90.00"/>

Full Name (Last, First, Middle Initial) <b>B. MR. ARTHUR H. HAAKE</b>		Date of Receipt
Mailing Address 1900 CAMELIA CIRCLE		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
MIDLOTHIAN	VA	23112-4174
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="201.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="101.00"/>

Full Name (Last, First, Middle Initial) <b>C. MS. GAEL S. HABERNICKEL</b>		Date of Receipt
Mailing Address 250 JOHNS ISLAND DRIVE		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
VERO BEACH	FL	32963-3237
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="120.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="311.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 918 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MICHELE CATHERINE HACHERL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2920 N. FORGEUS AVENUE  
 City TUCSON State AZ Zip Code 85716-1814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02439**  
 Amount of Each Receipt this Period  
 500.00

**B. MS. MICHELE CATHERINE HACHERL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2920 N. FORGEUS AVENUE  
 City TUCSON State AZ Zip Code 85716-1814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02440**  
 Amount of Each Receipt this Period  
 500.00

**C. MRS. CAROL HACKETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 550 HAVEN DRIVE  
 APARTMENT 305  
 City ARCHBOLD State OH Zip Code 43502-3242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02441**  
 Amount of Each Receipt this Period  
 75.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1075.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 919 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CAROL HACKETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 550 HAVEN DRIVE  
 APARTMENT 305  
 City ARCHBOLD State OH Zip Code 43502-3242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02442**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. CAROL HACKETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 550 HAVEN DRIVE  
 APARTMENT 305  
 City ARCHBOLD State OH Zip Code 43502-3242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02443**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. TOM HACKETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9264 SPRUCEWOOD ROAD  
 City BURKE State VA Zip Code 22015-3559  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer C.E.I. Occupation PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI02444**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 920 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD M. HADAD**  
Full Name (Last, First, Middle Initial)

Mailing Address 7 LONDONDERRY LANE

City SOMERS State NY Zip Code 10589-2902

FEC ID number of contributing federal political committee. **C**

Name of Employer COLLEGE MANUFACTURING COMPANY, I Occupation BUSINESS MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02445**

Amount of Each Receipt this Period 115.00

**B. MR. RICHARD M. HADAD**  
Full Name (Last, First, Middle Initial)

Mailing Address 7 LONDONDERRY LANE

City SOMERS State NY Zip Code 10589-2902

FEC ID number of contributing federal political committee. **C**

Name of Employer COLLEGE MANUFACTURING COMPANY, INC. Occupation BUSINESS MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI02446**

Amount of Each Receipt this Period 1.00

**C. MS. CLAUDINE Y. HADDOCK**  
Full Name (Last, First, Middle Initial)

Mailing Address 3450 BONNER DRIVE

City OLIVE BRANCH State MS Zip Code 38654-8123

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02447**

Amount of Each Receipt this Period 340.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 456.00

**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 921 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. GARY A. HADLEY**

Mailing Address 5684 MALLARD TRACE

City State Zip Code  
FRISCO TX 75034-5059

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LEARNING ENTERPRISES OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI02448**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**B. MR. GARY A. HADLEY**

Mailing Address 5684 MALLARD TRACE

City State Zip Code  
FRISCO TX 75034-5059

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LEARNING ENTERPRISES OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02449**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MR. GARY A. HADLEY**

Mailing Address 5684 MALLARD TRACE

City State Zip Code  
FRISCO TX 75034-5059

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
LEARNING ENTERPRISES OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02450**

Amount of Each Receipt this Period  
100.00

**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: PAGE 922 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. GEORGE HAEFNER**

Mailing Address P.O. BOX 506

City JACKSON State WY Zip Code 83001-0506

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02451**

Amount of Each Receipt this Period  
201.00

Full Name (Last, First, Middle Initial)  
**B. MRS. EILEEN HAERTHER**

Mailing Address 4531 SILVER BERRY COURT

City JACKSONVILLE State FL Zip Code 32224-6838

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02452**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MRS. EILEEN HAERTHER**

Mailing Address 4531 SILVER BERRY COURT

City JACKSONVILLE State FL Zip Code 32224-6838

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02453**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 301.00

**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 923 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. EILEEN HAERTHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4531 SILVER BERRY COURT  
 City JACKSONVILLE State FL Zip Code 32224-6838  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **251.00**

Date of Receipt: **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI02454**  
 Amount of Each Receipt this Period: **1.00**

**B. MRS. LAUREL J. HAFEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 843 E. 970 S. CIRCLE  
 City SAINT GEORGE State UT Zip Code 84790-4037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **500.00**

Date of Receipt: **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI02455**  
 Amount of Each Receipt this Period: **500.00**

**C. MR. BRUCE R. HAFNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14 SAINT JAMES PLACE UNIT A.  
 City LYNBROOK State NY Zip Code 11563-2644  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **SELF-EMPLOYED** Occupation: **ATTORNEY**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI02456**  
 Amount of Each Receipt this Period: **100.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **601.00**  
**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 924 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEVE HAGEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 147 DUNHAM RANCH ROAD  
 City State Zip Code  
 SULPHUR BLUFF TX 75481-5107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED AGRICULTURE BUSINESS  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02457**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. JOHN HAGENAH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 GREENWOOD AVENUE  
 City State Zip Code  
 WILMETTE IL 60091-1619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED ARCHITECT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02458**  
 Amount of Each Receipt this Period  
 2500.00

**C. MR. DENNIS D. HAGLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4582 MONUMENT POINT DRIVE  
 City State Zip Code  
 JACKSONVILLE FL 32225-1417  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 FLORIDA LEAGUE OF CITIES INC. CONSULTANT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 207.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02459**  
 Amount of Each Receipt this Period  
 45.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3045.00  
**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 925 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DENNIS D. HAGLER**

Mailing Address 4582 MONUMENT POINT DRIVE

City Jacksonville State FL Zip Code 32225-1417

FEC ID number of contributing federal political committee. **C**

Name of Employer FLORIDA LEAGUE OF CITIES INC. Occupation CONSULTANT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
207.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02460**

Amount of Each Receipt this Period  
57.00

Full Name (Last, First, Middle Initial)  
**B. MR. GARY H. HAGSTROM**

Mailing Address 10430 EAGLE LAKE ROAD

City Iron River State WI Zip Code 54847-4555

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02461**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MRS. DARLEAN HAHN**

Mailing Address 5259 101ST ROAD N.W.

City TIOGA State ND Zip Code 58852-9301

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02462**

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 307.00

**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 926 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID J. HAHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2040 DEERPATH LANE S.E.  
 City CEDAR RAPIDS State IA Zip Code 52403-1830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ROCKWELL COLLINS, INC. Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02463**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. GARY L. HAHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 197  
 City SALINE State MI Zip Code 48176-0197  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GARY L. HAHN, PC Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02464**  
 Amount of Each Receipt this Period  
 206.00

**C. JOEL HAHR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 MORSE DRIVE  
 City MAPLEWOOD State NJ Zip Code 07040-2007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DB Occupation SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02465**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 756.00  
**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 927 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. THOMAS S. HAHS</b>		Date of Receipt
Mailing Address P.O. BOX 300014		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City	State	Zip Code
SAINT LOUIS	MO	63130-0314
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI02466</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		250.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	600.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. ALENE D. HAINES</b>		Date of Receipt
Mailing Address 200 VETERANS LANE APARTMENT 816		M M M / D D D / Y Y Y Y Y Y 03 / 27 / 2014
City	State	Zip Code
DOYLESTOWN	PA	18901-3457
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI02467</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		280.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	280.00	

Full Name (Last, First, Middle Initial) <b>C. MR. C. G. HAINES</b>		Date of Receipt
Mailing Address 201 CRESCENT DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014
City	State	Zip Code
BEVERLY HILLS	CA	90210-4898
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI02468</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		156.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	406.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	686.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 928 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. NINA HAJEK**

Mailing Address 294 COUNTY ROAD 715

City State Zip Code  
BURLESON TX 76028-6020

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02469**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**B. MS. NINA HAJEK**

Mailing Address 294 COUNTY ROAD 715

City State Zip Code  
BURLESON TX 76028-6020

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02470**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**C. DR. MICHAEL V. HAJJAR**

Mailing Address 2138 W. FALCON POINT COURT

City State Zip Code  
BOISE ID 83703-4298

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02471**

Amount of Each Receipt this Period  
4000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4240.00

**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 929 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. NADER HAKAKIAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 34 ELMRIDGE ROAD  
 City State Zip Code  
 GREAT NECK NY 11024-1378  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DDC PRESIDENT (NY OFFICE)  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 316.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02472**  
 Amount of Each Receipt this Period  
 105.00

**B. MR. NADER HAKAKIAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 34 ELMRIDGE ROAD  
 City State Zip Code  
 GREAT NECK NY 11024-1378  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DDC PRESIDENT (NY OFFICE)  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 316.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02473**  
 Amount of Each Receipt this Period  
 106.00

**C. MR. DE L. HALBERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2008 W. THELBORN STREET  
 City State Zip Code  
 WEST COVINA CA 91790-1437  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02474**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 212.00  
**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 930 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CLAYTON H. HALE III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 111 E. 88TH STREET PH A.  
 City NEW YORK State NY Zip Code 10128-1174  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CITIGROUP Occupation FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02475**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. EDWIN J. HALE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 216 LORRAINE AVENUE  
 City SPRING LAKE State NJ Zip Code 07762-1715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE DEVELOPER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02476**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. VIRGINIA J. HALE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3905 N. ROCKWELL AVENUE  
 APARTMENT 113  
 City BETHANY State OK Zip Code 73008-3305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 296.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02477**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00  
**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 931 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. VIRGINIA J. HALE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3905 N. ROCKWELL AVENUE  
 APARTMENT 113  
 City BETHANY State OK Zip Code 73008-3305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 296.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02478**  
 Amount of Each Receipt this Period 26.00

**B. MR. J. EVETTS HALEY JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 2515  
 City MIDLAND State TX Zip Code 79702-2515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CATTLE RAISER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02479**  
 Amount of Each Receipt this Period 220.00

**C. MR. DAVID J. HALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16731 SAN SALVADOR ROAD  
 City SAN DIEGO State CA Zip Code 92128-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 381.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02480**  
 Amount of Each Receipt this Period 141.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 387.00  
**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 932 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. GARY HALL**

Mailing Address 21L GOLDTHWAITE ROAD  
APARTMENT 4

City Worcester State MA Zip Code 01605-1480

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02481**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MRS. HELEN HALL**

Mailing Address P.O. BOX 427

City Kingsland State TX Zip Code 78639-0427

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02482**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MR. ISAAC D. HALL**

Mailing Address 1907 COUNTY ROAD 129

City Pearland State TX Zip Code 77581-6246

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02483**

Amount of Each Receipt this Period  
60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 360.00

**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 933 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. MARTHA LYLES HALL</b>		Date of Receipt
Mailing Address P.O. BOX 445		<input type="text" value="03"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City State Zip Code BAY MINETTE AL 36507-0445		<b>Transaction ID : 2014M04L11AI02484</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="305.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MS. MARTHA LYLES HALL</b>		Date of Receipt
Mailing Address P.O. BOX 445		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City State Zip Code BAY MINETTE AL 36507-0445		<b>Transaction ID : 2014M04L11AI02485</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="40.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="305.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. RALPH M. HALL</b>		Date of Receipt
Mailing Address 1500 SUNSET HILL DRIVE		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City State Zip Code ROCKWALL TX 75087-3215		<b>Transaction ID : 2014M04L11AI02486</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="140.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 934 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. RALPH M. HALL**

Mailing Address 1500 SUNSET HILL DRIVE

City State Zip Code  
ROCKWALL TX 75087-3215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02487**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. COL. RICHARD C. HALL**

Mailing Address 7860 E. BENSON HIGHWAY #168

City State Zip Code  
TUCSON AZ 85756-8338

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02488**

Amount of Each Receipt this Period  
81.00

Full Name (Last, First, Middle Initial)  
**C. MRS. SONIA T. HALL**

Mailing Address 186 JERRY BROWNE ROAD  
UNIT 5208

City State Zip Code  
MYSTIC CT 06355-4024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
555.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02489**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 281.00

**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 935 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. RUBYE HALLFORD</b>		Date of Receipt
Mailing Address 357 HALLFORD LN		M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014
City	State	Zip Code
FREDERICKSBURG	TX	78624-2919
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI02490
FEC ID number: <b>C</b>		Amount of Each Receipt this Period
		150.00
Name of Employer	Occupation	
SELF	HEALTH FOOD STORE OWNER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	326.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. RUBYE HALLFORD</b>		Date of Receipt
Mailing Address 357 HALLFORD LN		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City	State	Zip Code
FREDERICKSBURG	TX	78624-2919
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI02491
FEC ID number: <b>C</b>		Amount of Each Receipt this Period
		76.00
Name of Employer	Occupation	
SELF	HEALTH FOOD STORE OWNER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	326.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. RUBYE HALLFORD</b>		Date of Receipt
Mailing Address 357 HALLFORD LN		M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014
City	State	Zip Code
FREDERICKSBURG	TX	78624-2919
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI02492
FEC ID number: <b>C</b>		Amount of Each Receipt this Period
		100.00
Name of Employer	Occupation	
SELF	HEALTH FOOD STORE OWNER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	326.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	326.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 936 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES A. HALLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4555 E. MAYO BLVD. #4301  
 City PHOENIX State AZ Zip Code 85050-6961  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 516.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02493**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. JAMES A. HALLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4555 E. MAYO BLVD. #4301  
 City PHOENIX State AZ Zip Code 85050-6961  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 516.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02494**  
 Amount of Each Receipt this Period  
 416.00

**C. MR. ROBERT A. HALMI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32 W. 18TH STREET  
 APARTMENT 10B  
 City NEW YORK State NY Zip Code 10011-4623  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PRODUCER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02495**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 517.00  
**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 937 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FREDD HALPERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 876  
 City MORTON State WA Zip Code 98356-0876  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02496**  
 Amount of Each Receipt this Period  
 45.00

**B. MR. PERRY HALQUIST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27626N N. 103RD PLACE  
 City SCOTTSDALE State AZ Zip Code 85262-8944  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 412.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02497**  
 Amount of Each Receipt this Period  
 202.00

**C. MR. PERRY HALQUIST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27626N N. 103RD PLACE  
 City SCOTTSDALE State AZ Zip Code 85262-8944  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 412.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02498**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 347.00  
**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 938 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. HARRIET HALSELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4341 POTOMAC AVENUE  
 City DALLAS State TX Zip Code 75205-2683  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer M.D.C. GIFT SHOPS Occupation INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02499**  
 Amount of Each Receipt this Period 1.00

**B. DR. RAMON G. HALUM JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 CARNOUSTIE COURT  
 City SCHERERVILLE State IN Zip Code 46375-2919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02500**  
 Amount of Each Receipt this Period 65.00

**C. MR. MARK A. HALUPNIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3319 ADELE LANE  
 City BETTENDORF State IA Zip Code 52722-8810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02501**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 566.00  
**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 939 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALAN G. HALVERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1826 STONEBROOK LANE  
 City CLOVIS State CA Zip Code 93611-5984  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02502**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. ALAN G. HALVERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1826 STONEBROOK LANE  
 City CLOVIS State CA Zip Code 93611-5984  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02503**  
 Amount of Each Receipt this Period  
 51.00

**C. MR. ALAN G. HALVERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1826 STONEBROOK LANE  
 City CLOVIS State CA Zip Code 93611-5984  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02504**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 126.00  
**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 940 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JUSTIN M. HALVERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1011 MAIN STREET  
 P.O. BOX 84  
 City SCOTLAND State SD Zip Code 57059-2013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RAKER TRUCKING Occupation TRUCK DRIVER  
 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  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02505**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. JUSTIN M. HALVERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1011 MAIN STREET  
 P.O. BOX 84  
 City SCOTLAND State SD Zip Code 57059-2013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RAKER TRUCKING Occupation TRUCK DRIVER  
 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  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02506**  
 Amount of Each Receipt this Period  
 150.00

**C. MR. RALPH R. HALVORSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 571897  
 City TARZANA State CA Zip Code 91357-1897  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02507**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 941 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT HALVORSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1620 YOST ROAD  
 City State Zip Code  
 TOPPENISH WA 98948-9455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED FARMER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02508**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. PAM HAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 525 W. BACA STREET  
 City State Zip Code  
 TRINIDAD CO 81082-1406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02509**  
 Amount of Each Receipt this Period  
 1000.00

**C. MRS. PAM HAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 525 W. BACA STREET  
 City State Zip Code  
 TRINIDAD CO 81082-1406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02510**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1101.00  
**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 942 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM J. HAMBLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9000 CUMBERLAND FALLS HIGHWAY  
 City CORBIN State KY Zip Code 40701-7819  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02511**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. JAMES R. HAMBY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2432 N.E. 49TH STREET  
 City Ocala State FL Zip Code 34479-7118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02512**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JAMES R. HAMBY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2432 N.E. 49TH STREET  
 City Ocala State FL Zip Code 34479-7118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02513**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 943 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DANIEL HAMELBERG**

Mailing Address 3201 VALLEY BROOK DRIVE

City State Zip Code  
CHAMPAIGN IL 61822-6109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02514**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. MS. ELIZABETH WOODWARD HAMILTON**

Mailing Address 6604 PINE ISLAND ROAD

City State Zip Code  
ALBANY GA 31721-9548

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED HORSETRAINER RIDING INSTRUCTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02515**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MRS. JEAN E. HAMILTON**

Mailing Address 13533 WEST U.S. HIGHWAY 69

City State Zip Code  
EAGLEVILLE MO 64442-9182

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
710.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02516**

Amount of Each Receipt this Period  
600.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1600.00

**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 944 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY LOU HAMILTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 33652 TIDEWATER DRIVE

City DANA POINT State CA Zip Code 92629-2121

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02517**

Amount of Each Receipt this Period  
 1.00

**B. MR. RICHARD HAMILTON**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2473  
106 E. SHORE CULVER ROAD

City BRANCHVILLE State NJ Zip Code 07826-2473

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02518**

Amount of Each Receipt this Period  
 301.00

**C. MR. GORDON R. HAMM**  
Full Name (Last, First, Middle Initial)

Mailing Address 35 PADDOCK ROAD

City HO HO KUS State NJ Zip Code 07423-1313

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation C.O.O.

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  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02519**

Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 502.00

**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 945 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GORDON R. HAMM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35 PADDOCK ROAD  
 City HO HO KUS State NJ Zip Code 07423-1313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation C.O.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02520**  
 Amount of Each Receipt this Period 100.00

**B. MR. JOHN A. HAMMACK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3801 MOCKINGBIRD LANE  
 City DALLAS State TX Zip Code 75205-2126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OIL & GAS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02521**  
 Amount of Each Receipt this Period 200.00

**C. MR. JAMES A. HAMMOND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 209 S. COTTAGE AVENUE  
 City NORMAL State IL Zip Code 61761-2736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 407.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02522**  
 Amount of Each Receipt this Period 137.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 437.00  
**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 946 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM P. HAMMOND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 83 ALEXANDRIA WAY  
 City BASKING RIDGE State NJ Zip Code 07920-2761  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CAF CORP. Occupation BUILDING MATERIAL - SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02523**  
 Amount of Each Receipt this Period 100.00

**B. MR. WILLIAM P. HAMMOND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 83 ALEXANDRIA WAY  
 City BASKING RIDGE State NJ Zip Code 07920-2761  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CAF CORP. Occupation BUILDING MATERIAL - SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02524**  
 Amount of Each Receipt this Period 100.00

**C. DR. JOHN F. HAMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55 TEXTER MOUNTAIN ROAD  
 City WERNERSVILLE State PA Zip Code 19565-9439  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation VETERINARIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 401.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02525**  
 Amount of Each Receipt this Period 201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	401.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 947 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD HANA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6180 SAINT ANDREWS COURT  
 City State Zip Code  
 PONTE VEDRA FL 32082-2002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED MONEY MANAGER  
 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  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02526**  
 Amount of Each Receipt this Period  
 750.00

**B. MR. R.T. DAN HANCHEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 320 SAINT IVES DRIVE  
 City State Zip Code  
 MADISON MS 39110-7182  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02527**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. R.T. DAN HANCHEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 320 SAINT IVES DRIVE  
 City State Zip Code  
 MADISON MS 39110-7182  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02528**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	951.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 948 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. VICTOR J. HANCOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2009 NANTUCKET DRIVE  
 City RICHARDSON State TX Zip Code 75080-2322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02529**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. WILLARD VANCE HANDLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 232 CHATHAM LANE  
 City ANNAPOLIS State MD Zip Code 21403-1018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02530**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. SUDIE CLARK HANGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3750 PEACHTREE ROAD N.E.  
 APARTMENT 780  
 City ATLANTA State GA Zip Code 30319-1322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02531**  
 Amount of Each Receipt this Period  
 100.00

**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 949 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SUDIE CLARK HANGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3750 PEACHTREE ROAD N.E.  
 APARTMENT 780  
 City ATLANTA State GA Zip Code 30319-1322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02532**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. SUDIE CLARK HANGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3750 PEACHTREE ROAD N.E.  
 APARTMENT 780  
 City ATLANTA State GA Zip Code 30319-1322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02533**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. MARGARET A. HANLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7006 NORTHWOOD ROAD  
 City DALLAS State TX Zip Code 75225-2438  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02534**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 950 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RUSSELL L. HANLIN SR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 119 E. UNION STREET  
SUITE C.

City PASADENA State CA Zip Code 91103-3951

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02535**

Amount of Each Receipt this Period 200.00

**B. MR. RAY E. HANNAH**  
Full Name (Last, First, Middle Initial)

Mailing Address 95 VALLEYBROOK DRIVE

City FAIRBURN State GA Zip Code 30213-1623

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02536**

Amount of Each Receipt this Period 250.00

**C. MRS. RITA HANNAH**  
Full Name (Last, First, Middle Initial)

Mailing Address 3202 E. ARROYO CHICO

City TUCSON State AZ Zip Code 85716-5811

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 271.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02537**

Amount of Each Receipt this Period 136.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 586.00

**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 951 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CAROLE L. HANSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1354 NW EAGLE STREET  
 City CAMAS State WA Zip Code 98607-9805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02538**  
 Amount of Each Receipt this Period  
 35.00

**B. MS. CAROLE L. HANSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1354 NW EAGLE STREET  
 City CAMAS State WA Zip Code 98607-9805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02539**  
 Amount of Each Receipt this Period  
 25.00

**C. MS. CAROLE L. HANSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1354 NW EAGLE STREET  
 City CAMAS State WA Zip Code 98607-9805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02540**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	85.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 952 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CAROLE L. HANSEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1354 NW EAGLE STREET

City CAMAS	State WA	Zip Code 98607-9805
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2014

**Transaction ID : 2014M04L11AI02541**

Amount of Each Receipt this Period  
36.00

**B. MR. JOHN HANSEN**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 631

City BUFFALO	State WY	Zip Code 82834-0631
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation CATTLE RANCHER
-----------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2014

**Transaction ID : 2014M04L11AI02542**

Amount of Each Receipt this Period  
205.00

**C. MR. RONALD D. HANSEN SR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 6572 WELLINGTON DRIVE

City MURRELLS INLET	State SC	Zip Code 29576-8938
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2014

**Transaction ID : 2014M04L11AI02543**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	491.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 953 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD D. HANSEN SR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 6572 WELLINGTON DRIVE

City MURRELLS INLET State SC Zip Code 29576-8938

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02544**

Amount of Each Receipt this Period  
 1.00

**B. MR. DAVID L. HANSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1120 KEYSTONE AVENUE

City RIVER FOREST State IL Zip Code 60305-1326

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02545**

Amount of Each Receipt this Period  
 100.00

**C. MR. DAVID L. HANSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1120 KEYSTONE AVENUE

City RIVER FOREST State IL Zip Code 60305-1326

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02546**

Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 102.00

**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 954 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DUANE HANSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5320 HIGHCASTLE COURT  
 City FORT COLLINS State CO Zip Code 80525-6716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02547**  
 Amount of Each Receipt this Period 51.00

**B. MR. WALTER LEE HANSON JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 SCHOOLEY CIRCLE  
 City DAPHNE State AL Zip Code 36526-7736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02548**  
 Amount of Each Receipt this Period 50.00

**C. MR. WALTER LEE HANSON JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 SCHOOLEY CIRCLE  
 City DAPHNE State AL Zip Code 36526-7736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02549**  
 Amount of Each Receipt this Period 121.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 222.00  
**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 955 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. NORMAN P. HARBERGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22 OYSTER LANDING ROAD  
 City HILTON HEAD ISLAND State SC Zip Code 29928-7102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02550**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. LISA HARBIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 BEACH ROAD  
 City LAGUNA VISTA State TX Zip Code 78578  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02551**  
 Amount of Each Receipt this Period  
 500.00

**C. MS. RUTH B. HARBISON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4301 SHEEP'S RUN  
 City LAFAYETTE HILL State PA Zip Code 19444-1020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02552**  
 Amount of Each Receipt this Period  
 251.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1001.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 956 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BEN HARDAWAY III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8301 BIG SHINN ROAD  
 City MIDLAND State GA Zip Code 31820-3610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02553**  
 Amount of Each Receipt this Period  
 1000.00

**B. MRS. LINDA HARDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5725 E. 97TH PLACE  
 City TULSA State OK Zip Code 74137-5005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02554**  
 Amount of Each Receipt this Period  
 150.00

**C. MR. ROBERT HARDING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 208 14TH STREET N.  
 City SARTELL State MN Zip Code 56377-2520  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WALMART Occupation PHARMACIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02555**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1151.00  
**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 957 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID HARDY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3131 160TH AVE NW  
 City FAIRVIEW State MT Zip Code 59221-9347  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HARDY AG. INC Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02556**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. DAVID R. HARDY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 620 8TH AVENUE  
 City NEW YORK State NY Zip Code 10018-1618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer OSLER, HASKIN & HARCOURT Occupation TAX ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02557**  
 Amount of Each Receipt this Period  
 500.00

**C. MS. VALERIE HARGIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 255 SUNSET ROAD  
 City HANSON State KY Zip Code 42413-9603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SUPERIOR TANK COMPANY, INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02558**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	635.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 958 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. VALERIE HARGIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 255 SUNSET ROAD  
 City HANSON State KY Zip Code 42413-9603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SUPERIOR TANK COMPANY, INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02559**  
 Amount of Each Receipt this Period  
 110.00

**B. DR. JOHN N. HARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 304 SIGNATURE TERRACE  
 City SAFETY HARBOR State FL Zip Code 34695-5425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02560**  
 Amount of Each Receipt this Period  
 250.00

**C. DR. JOHN N. HARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 304 SIGNATURE TERRACE  
 City SAFETY HARBOR State FL Zip Code 34695-5425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02561**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 610.00  
**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 959 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DOROTHY M. HARKNESS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 925 IRVING DRIVE  
 City BURBANK State CA Zip Code 91504-1836  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02562**  
 Amount of Each Receipt this Period  
 165.00

**B. MRS. DOROTHY M. HARKNESS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 925 IRVING DRIVE  
 City BURBANK State CA Zip Code 91504-1836  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02563**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. HAROLD JASPER HARLOWE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 213 JERNIGAN LANE  
 City YORKTOWN State VA Zip Code 23692-3149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02564**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	565.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 960 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RODNEY W. HARMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3814 S. RHONDA STREET  
 City EDINBURG State TX Zip Code 78539-3130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02565**  
 Amount of Each Receipt this Period 201.00

**B. MR. MARK HARMON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7144 E. VIRGINIA SUITE F.  
 City EVANSVILLE State IN Zip Code 47715-9125  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02566**  
 Amount of Each Receipt this Period 201.00

**C. MR. JAMES M. HARNDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5885 KILBANNAN COURT  
 City DUBLIN State OH Zip Code 43017-7602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02567**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 652.00  
**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 962 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBY HARRINGTON III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 498  
 City BOCA GRANDE State FL Zip Code 33921-0498  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02571**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. BOBBYE F. HARRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 135 WINDSOR DRIVE  
 City CALHOUN State GA Zip Code 30701-2055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02572**  
 Amount of Each Receipt this Period  
 501.00

**C. MR. CURTIS HARRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19940 CR 1542  
 City ADA State OK Zip Code 74820-3110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation PHYSICIAN  
 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  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02573**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1201.00  
**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 963 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. CURTIS HARRIS**

Mailing Address 19940 CR 1542

City ADA State OK Zip Code 74820-3110

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation PHYSICIAN

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  
**03 / 31 / 2014**

**Transaction ID : 2014M04L11AI02574**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. MRS. EVA C. HARRIS**

Mailing Address P.O. BOX 1333

City ARDMORE State OK Zip Code 73402-1333

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **234.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 14 / 2014**

**Transaction ID : 2014M04L11AI02575**

Amount of Each Receipt this Period  
**60.00**

Full Name (Last, First, Middle Initial)  
**C. MRS. EVA C. HARRIS**

Mailing Address P.O. BOX 1333

City ARDMORE State OK Zip Code 73402-1333

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **234.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 17 / 2014**

**Transaction ID : 2014M04L11AI02576**

Amount of Each Receipt this Period  
**55.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **215.00**

**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 964 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. EVA C. HARRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1333  
 City ARDMORE State OK Zip Code 73402-1333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02577**  
 Amount of Each Receipt this Period  
 62.00

**B. MRS. KERRY HARRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 990 SAPPHIRE DRIVE  
 City CASTLE ROCK State CO Zip Code 80108-7807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02578**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. NICK G. HARRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4890 PINE TREE DRIVE  
 City BOYNTON BEACH State FL Zip Code 33436-4831  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02579**  
 Amount of Each Receipt this Period  
 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	617.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 965 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. NICK G. HARRIS**

Mailing Address 4890 PINE TREE DRIVE

City State Zip Code  
BOYNTON BEACH FL 33436-4831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02580**

Amount of Each Receipt this Period  
55.00

Full Name (Last, First, Middle Initial)  
**B. MR. NICK G. HARRIS**

Mailing Address 4890 PINE TREE DRIVE

City State Zip Code  
BOYNTON BEACH FL 33436-4831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02581**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**C. MR. OWEN D. HARRIS**

Mailing Address 1203 N. ASHLEY STREET

City State Zip Code  
VALDOSTA GA 31601-4015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED RESTAURANT OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02582**

Amount of Each Receipt this Period  
101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 157.00

**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 966 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BLANCHE M. HARRISON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 WESTCOTT STREET  
 UNIT 1904  
 City HOUSTON State TX Zip Code 77007-7001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation EDUCATION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02583**  
 Amount of Each Receipt this Period  
 245.00

**B. MR. JOSHUA HARRISON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 207 LEE AVENUE  
 City COLLEGE STATION State TX Zip Code 77840-3178  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02584**  
 Amount of Each Receipt this Period  
 440.00

**C. MRS. ARDIS A. HART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5631 NEWINGTON ROAD  
 City BETHESDA State MD Zip Code 20816-3321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02585**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	985.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 967 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRUCE HART**  
Full Name (Last, First, Middle Initial)

Mailing Address 319 GALLUP HILL ROAD

City LEDYARD State CT Zip Code 06339-2012

FEC ID number of contributing federal political committee. **C**

Name of Employer GD/EB Occupation FACILITY DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02586**

Amount of Each Receipt this Period  
 250.00

**B. DR. WILLIAM L. HART**  
Full Name (Last, First, Middle Initial)

Mailing Address 3112 SOLIMAR BEACH DRIVE

City VENTURA State CA Zip Code 93001-9756

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02587**

Amount of Each Receipt this Period  
 120.00

**C. MR. DAVID HARTLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 4042 HAINES ROAD  
UNIT 104

City DULUTH State MN Zip Code 55811-1751

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02588**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 420.00

**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 968 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ROSEANNE M. HARTLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 316 PATSY COURT  
 City WEST DEPTFORD State NJ Zip Code 08066-2034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MBREY SUBURBAN HOSPITAL Occupation REGISTERED NURSE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02589**  
 Amount of Each Receipt this Period  
 150.00

**B. MRS. ROSEANNE M. HARTLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 316 PATSY COURT  
 City WEST DEPTFORD State NJ Zip Code 08066-2034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MBREY SUBURBAN HOSPITAL Occupation REGISTERED NURSE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02590**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. THOMAS L. HARTLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22001 GOLDEN GATE CANYON ROAD  
 City GOLDEN State CO Zip Code 80403-8145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02591**  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1250.00  
**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 969 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PAUL W. HARTLOFF JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 558 VIA TRANQUILA

City SANTA BARBARA State CA Zip Code 93110-2228

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02592**

Amount of Each Receipt this Period  
 2500.00

**B. MR. DUANE L. HARTMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 114 RIDGE ROAD

City EVERGREEN State CO Zip Code 80439-4212

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02593**

Amount of Each Receipt this Period  
 250.00

**C. MR. JOHN LOUIS HARTMAN III**  
Full Name (Last, First, Middle Initial)

Mailing Address 234 MONTEREY PLACE

City VESTAVIA State AL Zip Code 35216-1314

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02594**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

**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 970 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LYNDA J. HARTMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8033 W. SUNSET BLVD.  
 City WEST HOLLYWOOD State CA Zip Code 90046-2401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 621.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02595**  
 Amount of Each Receipt this Period 120.00

**B. MRS. LYNDA J. HARTMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8033 W. SUNSET BLVD.  
 City WEST HOLLYWOOD State CA Zip Code 90046-2401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 621.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02596**  
 Amount of Each Receipt this Period 200.00

**C. MRS. LYNDA J. HARTMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8033 W. SUNSET BLVD.  
 City WEST HOLLYWOOD State CA Zip Code 90046-2401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 621.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02597**  
 Amount of Each Receipt this Period 201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	521.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 971 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. RAE E. HARTMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2123 LURAY AVENUE  
 APARTMENT 7  
 City CINCINNATI State OH Zip Code 45206-2629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02598**  
 Amount of Each Receipt this Period 141.00

**B. MR. RALPH G. HARTMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 173  
 City THE PLAINS State OH Zip Code 45780-0173  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HARTMAN INSURANCE Occupation INSURANCE AGENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02599**  
 Amount of Each Receipt this Period 250.00

**C. MR. JOHN HARTNETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2419 SMALLMAN STREET  
 City PITTSBURGH State PA Zip Code 15222-4675  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VACUUM RESEARCH, LTD. Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02600**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 641.00  
**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 972 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. CINDRA HARTWELL</b>		Date of Receipt MM / DD / YYYY 03 / 13 / 2014 <b>Transaction ID : 2014M04L11AI02601</b>
Mailing Address 1607 SOUTHWOOD BLVD.		Amount of Each Receipt this Period 200.00
City ARLINGTON	State TX	Zip Code 76013-3509
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. DONNA HARTZELL</b>		Date of Receipt MM / DD / YYYY 03 / 14 / 2014 <b>Transaction ID : 2014M04L11AI02602</b>
Mailing Address 5031 BOONE POINT ROAD NW		Amount of Each Receipt this Period 100.00
City HACKENSACK	State MN	Zip Code 56452-2415
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. DONNA HARTZELL</b>		Date of Receipt MM / DD / YYYY 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI02603</b>
Mailing Address 5031 BOONE POINT ROAD NW		Amount of Each Receipt this Period 100.00
City HACKENSACK	State MN	Zip Code 56452-2415
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 973 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY C. HARTZELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1562 SALEM COURT, SW

City ROCHESTER State MN Zip Code 55902-4300

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02604**

Amount of Each Receipt this Period  
 100.00

**B. MR. MARK J. HARVEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 295 ROGERS ROAD

City ONEONTA State AL Zip Code 35121-7849

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02605**

Amount of Each Receipt this Period  
 300.00

**C. MR. OWEN D. HARVEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 6683 E. NEW DISCOVERY ROAD

City ROCKVILLE State IN Zip Code 47872-7057

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02606**

Amount of Each Receipt this Period  
 350.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

**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 974 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PAUL HARVEY JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 715 HARVEY STREET  
 City EL PASO State TX Zip Code 79922-2136  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02607**  
 Amount of Each Receipt this Period  
 400.00

**B. MR. SHELDON D. HARVEY JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 227 SNEAD ROAD  
 City NEW BERN State NC Zip Code 28560-9409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02608**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. WILLIAM B. HARVEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 290  
 City MOBILE State AL Zip Code 36601-0290  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02609**  
 Amount of Each Receipt this Period  
 141.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 641.00  
**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 975 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JOHN F. HASKINS**

Mailing Address 861 HAWTHORNE CIRCLE

City State Zip Code  
LOMBARD IL 60148-3636

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02610**

Amount of Each Receipt this Period  
121.00

Full Name (Last, First, Middle Initial)  
**B. MRS. NATALIE L. HASLAM**

Mailing Address 1640 LYONS BEND ROAD

City State Zip Code  
KNOXVILLE TN 37919-8918

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02611**

Amount of Each Receipt this Period  
32400.00

Full Name (Last, First, Middle Initial)  
**C. MR. CLOVIS R. HASSLER**

Mailing Address P.O. BOX 147

City State Zip Code  
VERDI NV 89439-0147

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2111.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02612**

Amount of Each Receipt this Period  
205.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 32726.00

**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 976 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CLOVIS R. HASSLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 147  
 City VERDI State NV Zip Code 89439-0147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2111.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02613**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. CLOVIS R. HASSLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 147  
 City VERDI State NV Zip Code 89439-0147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2111.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02614**  
 Amount of Each Receipt this Period  
 171.00

**C. MR. RAY HASSLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 147  
 City VERDI State NV Zip Code 89439-0147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02615**  
 Amount of Each Receipt this Period  
 220.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 641.00  
**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 977 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RAY HASSLER**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 147

City VERDI State NV Zip Code 89439-0147

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 27 / 2014**

**Transaction ID : 2014M04L11AI02616**

Amount of Each Receipt this Period  
**250.00**

**B. MR. FRANK HATAJACK**  
Full Name (Last, First, Middle Initial)

Mailing Address 78 SCHILL AVE.

City KENNER State LA Zip Code 70065-3353

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **202.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 28 / 2014**

**Transaction ID : 2014M04L11AI02617**

Amount of Each Receipt this Period  
**102.00**

**C. MR. MICHAEL HATCH**  
Full Name (Last, First, Middle Initial)

Mailing Address 196 TEHCNOLOGY DRIVE SUITE F.

City IRVINE State CA Zip Code 92618-2415

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation I. T. CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 03 / 2014**

**Transaction ID : 2014M04L11AI02618**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **402.00**

**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 978 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL HATCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1053 N. STATE HIGHWAY 95  
 City BASTROP State TX Zip Code 78602-6766  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SURVEYING AND MAPPING, INC. Occupation LAND SURVEYOR/BUSINESS MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02619**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. MONICA J. HATFIELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1621 WOODVALE DRIVE  
 City CHARLESTON State WV Zip Code 25314-2538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI02620**  
 Amount of Each Receipt this Period  
 300.00

**C. MS. MARIE TAYLOR HATHCOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 729 MITCH DRIVE  
 City WINSTON SALEM State NC Zip Code 27104-5127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02621**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 979 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARIE TAYLOR HATHCOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 729 MITCH DRIVE  
 City WINSTON SALEM State NC Zip Code 27104-5127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02622**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. HAMILTON L. HATOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3325 S. BAKER STREET  
 City SANTA ANA State CA Zip Code 92707-3823  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI02623**  
 Amount of Each Receipt this Period  
 75.00

**C. MR. HAMILTON L. HATOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3325 S. BAKER STREET  
 City SANTA ANA State CA Zip Code 92707-3823  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02624**  
 Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 210.00  
**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 980 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HAMILTON L. HATOK**  
Full Name (Last, First, Middle Initial)

Mailing Address 3325 S. BAKER STREET

City SANTA ANA State CA Zip Code 92707-3823

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **361.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**

**Transaction ID : 2014M04L11AI02625**

Amount of Each Receipt this Period  
**76.00**

**B. MR. CLOVIS HAUBEIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 399 S. DADE 51

City LOCKWOOD State MO Zip Code 65682-7311

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : 2014M04L11AI02626**

Amount of Each Receipt this Period  
**500.00**

**C. MS. PAMELA HAUBRICH**  
Full Name (Last, First, Middle Initial)

Mailing Address 4201 YACHT CLUB ROAD

City JACKSONVILLE State FL Zip Code 32210-8315

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation MILL WORK

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : 2014M04L11AI02627**

Amount of Each Receipt this Period  
**220.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>796.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 981 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JAMES E. HAUGHT**

Mailing Address 13181 IL. HIGHWAY 16

City State Zip Code  
PARIS IL 61944-6704

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02628**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. MR. JAMES E. HAUGHT**

Mailing Address 13181 IL. HIGHWAY 16

City State Zip Code  
PARIS IL 61944-6704

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02629**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**C. MR. JAMES E. HAUGHT**

Mailing Address 13181 IL. HIGHWAY 16

City State Zip Code  
PARIS IL 61944-6704

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02630**

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 86.00

**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 982 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SVEIN B. HAUGLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5391 BENNINGTON HILLS DRIVE  
 City Columbus State OH Zip Code 43220-6253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02631**  
 Amount of Each Receipt this Period 30.00

**B. MR. SVEIN B. HAUGLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5391 BENNINGTON HILLS DRIVE  
 City Columbus State OH Zip Code 43220-6253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02632**  
 Amount of Each Receipt this Period 55.00

**C. MR. SVEIN B. HAUGLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5391 BENNINGTON HILLS DRIVE  
 City Columbus State OH Zip Code 43220-6253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02633**  
 Amount of Each Receipt this Period 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 86.00  
**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 983 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SVEIN B. HAUGLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5391 BENNINGTON HILLS DRIVE  
 City State Zip Code  
 COLUMBUS OH 43220-6253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02634**  
 Amount of Each Receipt this Period  
 30.00

**B. MR. ROGER E. HAUGO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 19  
 City State Zip Code  
 LENNOX SD 57039-0019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 VALLEY EXCHANGE BANK BANKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02635**  
 Amount of Each Receipt this Period  
 250.00

**C. DR. DAVID N. HAUSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13765 F.M. 1944  
 City State Zip Code  
 ODEM TX 78370-4108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 UNIVERSITY OF TEXAS DENTIST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02636**  
 Amount of Each Receipt this Period  
 165.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 445.00  
**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 984 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. DR. DAVID N. HAUSER</b>			Date of Receipt
Mailing Address 13765 F.M. 1944			<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : 2014M04L11AI02637</b>
ODEM	TX	78370-4108	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="100.00"/>
Name of Employer	Occupation		
UNIVERSITY OF TEXAS	DENTIST		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="265.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. MRS. ANNA LEE HAUSMAN</b>			Date of Receipt
Mailing Address 485 LISA AVENUE			<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : 2014M04L11AI02638</b>
ODENTON	MD	21113-2019	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="250.00"/>
Name of Employer	Occupation		
HOMEMAKER	HOMEMAKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. MR. GEORGE HAUX</b>			Date of Receipt
Mailing Address 2328 18TH CIRCLE WEST			<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : 2014M04L11AI02639</b>
WILLISTON	ND	58801-2530	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="250.00"/>
Name of Employer	Occupation		
WELL PRO, INC.	GENERAL MANAGER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="600.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 985 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ROBERT J. HAWKE**

Mailing Address 8030 FRANKFORD ROAD  
APARTMENT 310

City DALLAS State TX Zip Code 75252-6837

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02640**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT J. HAWKE**

Mailing Address 8030 FRANKFORD ROAD  
APARTMENT 310

City DALLAS State TX Zip Code 75252-6837

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02641**

Amount of Each Receipt this Period  
20.00

Full Name (Last, First, Middle Initial)  
**C. MR. ROBERT J. HAWKE**

Mailing Address 8030 FRANKFORD ROAD  
APARTMENT 310

City DALLAS State TX Zip Code 75252-6837

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02642**

Amount of Each Receipt this Period  
26.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 146.00

**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 986 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT J. HAWKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8030 FRANKFORD ROAD  
 APARTMENT 310  
 City DALLAS State TX Zip Code 75252-6837  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02643**  
 Amount of Each Receipt this Period  
 20.00

**B. MRS. KAREN D. HAWKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2621 MAPLE TREE DRIVE  
 City SAINT CHARLES State MO Zip Code 63303-4459  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02644**  
 Amount of Each Receipt this Period  
 250.00

**C. MS. MARY JANE HAWKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1800 N. 216TH STR.  
 City ELKHORN State NE Zip Code 68022-1662  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CHILDREN'HOSPITAL&MEDICALCENTER Occupation R.N.  
 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  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02645**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	420.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 987 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. COL ROBERT L. HAWKINS JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 1024 W. MAIN STREET  
APARTMENT 287

City JEFFERSON CITY State MO Zip Code 65109-6941

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
03 / 10 / 2014  
Transaction ID : 2014M04L11AI02646

Amount of Each Receipt this Period  
750.00

**B. COL ROBERT L. HAWKINS JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 1024 W. MAIN STREET  
APARTMENT 287

City JEFFERSON CITY State MO Zip Code 65109-6941

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
03 / 26 / 2014  
Transaction ID : 2014M04L11AI02647

Amount of Each Receipt this Period  
100.00

**C. MR. FRANK HAWLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2129

City BOCA GRANDE State FL Zip Code 33921-2129

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
03 / 24 / 2014  
Transaction ID : 2014M04L11AI02648

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1050.00

**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 988 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL HAWORTH**  
Full Name (Last, First, Middle Initial)

Mailing Address 623 E. 12TH 1/2 STREET

City HOUSTON State TX Zip Code 77008-7117

FEC ID number of contributing federal political committee. **C**

Name of Employer C.B. & I. Occupation PROCESS ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02649**

Amount of Each Receipt this Period  
 140.00

**B. MR. MICHAEL HAWORTH**  
Full Name (Last, First, Middle Initial)

Mailing Address 623 E. 12TH 1/2 STREET

City HOUSTON State TX Zip Code 77008-7117

FEC ID number of contributing federal political committee. **C**

Name of Employer C.B. & I. Occupation PROCESS ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02650**

Amount of Each Receipt this Period  
 100.00

**C. MRS. MARILYN HAYDEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 10306 E. CALLE DE LAS BRISAS

City SCOTTSDALE State AZ Zip Code 85255-3762

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

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  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02651**

Amount of Each Receipt this Period  
 750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 990.00

**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 989 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. RENA HAYDEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 5101 SUMMITVIEW AVENUE  
UNIT 4

City YAKIMA State WA Zip Code 98908-2863

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 526.00

Date of Receipt  
03 / 24 / 2014  
Transaction ID : 2014M04L11AI02652

Amount of Each Receipt this Period  
351.00

**B. MR. KLAYTON W. HAYES**  
Full Name (Last, First, Middle Initial)

Mailing Address 155 WARREN ROAD

City PITTSTON State ME Zip Code 04345-5953

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 21 / 2014  
Transaction ID : 2014M04L11AI02653

Amount of Each Receipt this Period  
250.00

**C. MR. CLINTON A. HAYNES**  
Full Name (Last, First, Middle Initial)

Mailing Address 4662 MORRIS COURT

City MASON State OH Zip Code 45040-4656

FEC ID number of contributing federal political committee. **C**

Name of Employer STRESS ENGINEERING SERVICES, INC. Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
03 / 26 / 2014  
Transaction ID : 2014M04L11AI02654

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1601.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 990 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. TERRY G. HAZARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5484 CORAL REEF AVENUE  
 City LA JOLLA State CA Zip Code 92037-7026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02655**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. MARK S. HAZLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 CONCHITO  
 City RANCHO SANTA MARGARITA State CA Zip Code 92688-2752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1070.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02656**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. MARK S. HAZLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 CONCHITO  
 City RANCHO SANTA MARGARITA State CA Zip Code 92688-2752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1070.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02657**  
 Amount of Each Receipt this Period  
 100.00

**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 991 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARK S. HAZLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 CONCHITO

City RANCHO SANTA MARGARITA	State CA	Zip Code 92688-2752
--------------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1070.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02658**

Amount of Each Receipt this Period  
200.00

**B. MR. MARK S. HAZLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 CONCHITO

City RANCHO SANTA MARGARITA	State CA	Zip Code 92688-2752
--------------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1070.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02659**

Amount of Each Receipt this Period  
50.00

**C. MR. JOHN M. HAZLITT**  
Full Name (Last, First, Middle Initial)

Mailing Address 4750 PLEASANT OAK  
UNIT 107

City FORT COLLINS	State CO	Zip Code 80525-3733
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02660**

Amount of Each Receipt this Period  
120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 992 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN M. HAZLITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4750 PLEASANT OAK  
 UNIT 107  
 City FORT COLLINS State CO Zip Code 80525-3733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02661**  
 Amount of Each Receipt this Period  
 1.00

**B. MS. PATRICIA C. HEADLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 312 ELM ST  
 SUITE 2600  
 City CINCINNATI State OH Zip Code 45202-2728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02662**  
 Amount of Each Receipt this Period  
 32400.00

**C. MRS. ANN HEARN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 142 BALTIMORE DRIVE  
 City OAK RIDGE State TN Zip Code 37830-7843  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02663**  
 Amount of Each Receipt this Period  
 211.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32612.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 993 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. RUTH T. HEATH**  
Full Name (Last, First, Middle Initial)

Mailing Address 9160 EAST WETHERSFIELD ROAD

City SCOTTSDALE State AZ Zip Code 85260-5052

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 442.00

Date of Receipt: 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02664**

Amount of Each Receipt this Period: 222.00

**B. MR. EARL ROBERT HEATLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 6800 S. GRANITE AVEUNE APARTMENT 503

City TULSA State OK Zip Code 74136-7045

FEC ID number of contributing federal political committee. **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02665**

Amount of Each Receipt this Period: 120.00

**C. MRS. JANICE HEBERT**  
Full Name (Last, First, Middle Initial)

Mailing Address 55 AVENUE OF THE OAKS

City BEAUMONT State TX Zip Code 77707-1801

FEC ID number of contributing federal political committee. **C**

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02666**

Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 842.00

**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 994 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARY PAT HECK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24911 FARNAM CIRCLE  
 City WATERLOO State NE Zip Code 68069-4693  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HECK & MOELLER FINANCIAL SERVICES Occupation FINANCIAL ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02667**  
 Amount of Each Receipt this Period  
 201.00

**B. MR. LAWRENCE J. HECKLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1402 HACKETT STREET  
 City BELOIT State WI Zip Code 53511-4278  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02668**  
 Amount of Each Receipt this Period  
 90.00

**C. MS. BRENDA J. HEFLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2110 DAWLEY AVENUE  
 City ORLANDO State FL Zip Code 32806-3311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HEFLIN TAX & ACCOUNTING SERVICE Occupation ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02669**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 392.00  
**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 995 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID S. HEFTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 192 LANDIS WAY N.  
 City State Zip Code  
 WILMINGTON DE 19803-6405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02670**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. MARIANNA HEGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10425 WOODLAND RIDGE W.  
 City State Zip Code  
 FORT WAYNE IN 46804-8305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02671**  
 Amount of Each Receipt this Period  
 111.00

**C. MR. VIRGIL HEIDBRINK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8523 THACKERY STREET  
 APARTMENT 7102  
 City State Zip Code  
 DALLAS TX 75225-3924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02672**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 711.00  
**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 996 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. DR. DOUGLAS HEIN**

Mailing Address P.O. BOX 99

City State Zip Code  
ODUM GA 31555-0099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED ORTHOPAEDIC SURGEON

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02673**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. LARRY HEINLE**

Mailing Address 3404 BALTUS LANE #3

City State Zip Code  
BISMARCK ND 58501-5469

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED SALES MANAGER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02674**

Amount of Each Receipt this Period  
235.00

Full Name (Last, First, Middle Initial)  
**C. MR. ALLEN J. HEINMILLER**

Mailing Address 617 E. 7TH STREET

City State Zip Code  
WAVERLY OH 45690-1564

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02675**

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 520.00

**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 997 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALLEN J. HEINMILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 617 E. 7TH STREET  
 City WAVERLY State OH Zip Code 45690-1564  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02676**  
 Amount of Each Receipt this Period 35.00

**B. MR. ALLEN J. HEINMILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 617 E. 7TH STREET  
 City WAVERLY State OH Zip Code 45690-1564  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02677**  
 Amount of Each Receipt this Period 25.00

**C. LT. GEN. ROLLAND V. HEISER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4104 LAS PALMAS WAY  
 City SARASOTA State FL Zip Code 34238-4532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 770.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02678**  
 Amount of Each Receipt this Period 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 180.00  
**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 998 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JOAN ELIZABETH HEKIMIAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 701 KING FARM BLVD.  
 APARTMENT 643  
 City State Zip Code  
 ROCKVILLE MD 20850-6187  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02679**  
 Amount of Each Receipt this Period  
 750.00

**B. MR. THOMAS R. HELDING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1831 LYERLY AVENUE  
 City State Zip Code  
 LAKESIDE AZ 85929-5880  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED CARPENTER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02680**  
 Amount of Each Receipt this Period  
 155.00

**C. MR. ARLEIGH HELFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1729 STRICKLAND DRIVE  
 City State Zip Code  
 BLOOMFIELD MI 48302-2552  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02681**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1155.00  
**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 999 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD HELLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 681 SANTA CLARA CIRCLE

City HEMET State CA Zip Code 92543-6973

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02682**

Amount of Each Receipt this Period  
 1.00

**B. MR. DAVID DALE HELMREICH**  
Full Name (Last, First, Middle Initial)

Mailing Address 6556 FRASER ROAD

City BAY CITY State MI Zip Code 48706-9706

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02683**

Amount of Each Receipt this Period  
 120.00

**C. MR. DAVID DALE HELMREICH**  
Full Name (Last, First, Middle Initial)

Mailing Address 6556 FRASER ROAD

City BAY CITY State MI Zip Code 48706-9706

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02684**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 221.00

**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 1000 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ARTHUR W. HELWIG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8911 HIGHFIELD ROAD  
 City RICHMOND State VA Zip Code 23229-7756  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 776.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02685**  
 Amount of Each Receipt this Period 250.00

**B. MR. ARTHUR W. HELWIG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8911 HIGHFIELD ROAD  
 City RICHMOND State VA Zip Code 23229-7756  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 776.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02686**  
 Amount of Each Receipt this Period 1.00

**C. MR. JOHN HEMAUER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6005 AVENIDA DE CASTILLO  
 City LONG BEACH State CA Zip Code 90803-2005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI02687**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 501.00  
**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 1001 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TONY HEMMINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2935 CLAIRTON DRIVE  
 City State Zip Code  
 HIGHLANDS RANCH CO 80126-4554  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 WESTERN INVESTOR NETWORK, LLC REAL ESTATE  
 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  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02688**  
 Amount of Each Receipt this Period  
 150.00

**B. MR. JOHN HENDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1195 PARTRIDGE ROAD  
 City State Zip Code  
 SPARTANBURG SC 29302-3355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02689**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. MARK HENDERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1317 DANA PLACE  
 City State Zip Code  
 FULLERTON CA 92831-1108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BERSHIRE HATHAWAY REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02690**  
 Amount of Each Receipt this Period  
 251.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1401.00  
**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 1002 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DIANE M. HENDRICKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4007 EAU CLAIRE ROAD  
 City AFTON State WI Zip Code 53501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HENDRICKS HOLDING COMPANY Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02691**  
 Amount of Each Receipt this Period  
 6200.00

**B. MR. MAC HENDRICKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1804 FOREST HILLS  
 City MCKINNEY State TX Zip Code 75070-4012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02692**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. RAY HENDRICKSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 140 SUMMIT STREET  
 City PEABODY State MA Zip Code 01960-5156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CBD Occupation PRESIDENT/CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 12400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02693**  
 Amount of Each Receipt this Period  
 12400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	18900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1003 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT W. HENDRICKSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2742 W. FONTAINEBLEAU DRIVE  
 City ATLANTA State GA Zip Code 30360-1240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02694**  
 Amount of Each Receipt this Period  
 301.00

**B. MR. PRESTON HENNE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 RAVENWOOD ROAD  
 City HILTON HEAD ISLAND State SC Zip Code 29928-3380  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02695**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. PRESTON HENNE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 RAVENWOOD ROAD  
 City HILTON HEAD ISLAND State SC Zip Code 29928-3380  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02696**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2301.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1004 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CORKY HENNINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24 WADE HAMPTON DRIVE  
 City LADYS ISLAND State SC Zip Code 29907-1912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02697**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. JOHN HENRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3508 EUCLID AVENUE  
 City DALLAS State TX Zip Code 75205-3214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02698**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. DAVID C. HENSLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 94685  
 City PASADENA State CA Zip Code 91109-4685  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02699**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 870.00  
**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 1005 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. DUANE HENSON</b>		Date of Receipt
Mailing Address 2901 W. US HIGHWAY 83 TRAILER 156		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
MCALLEN	TX	78501-8226
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI02700</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="135.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="270.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MS. SHARON HENSON</b>		Date of Receipt
Mailing Address 704 MARATHON DRIVE		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
HAGERSTOWN	MD	21740-6116
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI02701</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="201.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MS. SHARON HENSON</b>		Date of Receipt
Mailing Address 704 MARATHON DRIVE		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
HAGERSTOWN	MD	21740-6116
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI02702</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="101.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="201.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="336.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 1006 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. VENDLA E. HENTHORNE</b>		Date of Receipt
Mailing Address 5 MOUNTAIN DRIVE		<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
CODY	WY	82414-8831
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI02703</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="800.00"/>
Name of Employer	Occupation	
SELF-EMPLOYED	RANCHER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="800.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. GERALD W. HEPPLER</b>		Date of Receipt
Mailing Address 2833 LAKESHORE DRIVE		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAINT JOSEPH	MI	49085-2320
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI02704</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="120.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. GERALD W. HEPPLER</b>		Date of Receipt
Mailing Address 2833 LAKESHORE DRIVE		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAINT JOSEPH	MI	49085-2320
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI02705</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1020.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 1007 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CONNIE S. HERBERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25550 N. TUSCARORA COURT  
 City LAKE BARRINGTON State IL Zip Code 60010-1140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1250.00**

Date of Receipt: **03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI02706**  
 Amount of Each Receipt this Period: **1000.00**

**B. MR. JOHN HERBST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address S63W34393 PIPER ROAD  
 City NORTH PRAIRIE State WI Zip Code 53153-9403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **SELF-EMPLOYED** Occupation: **ENGINEER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt: **03 / 07 / 2014**  
**Transaction ID : 2014M04L11AI02707**  
 Amount of Each Receipt this Period: **250.00**

**C. MRS. NELLIE L. HERING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6424 CRAMPTON DRIVE N.  
 City KEIZER State OR Zip Code 97303-7456  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **03 / 06 / 2014**  
**Transaction ID : 2014M04L11AI02708**  
 Amount of Each Receipt this Period: **200.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1450.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1008 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. KENNETH HERMAN</b>		Date of Receipt
Mailing Address 11 MOUNTAIN LAUREL LANE APARTMENT 120		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
RHINEBECK	NY	12572-7308
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI02709</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="1.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="401.00"/>	

Full Name (Last, First, Middle Initial) <b>B. DR. PETER HERMAN</b>		Date of Receipt
Mailing Address 104 WESTSIDE DRIVE		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
BALLSTON LAKE	NY	12019-2028
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI02710</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	DENTIST	<input type="text" value="220.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. BJORNAR HERMANSEN</b>		Date of Receipt
Mailing Address 205 HACIENDA DRIVE		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
MERRITT ISLAND	FL	32952-6410
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI02711</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	PRESIDENT	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="721.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1009 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. BEN H. HERMON**

Mailing Address P.O. BOX 548

City PALMER      State AK      Zip Code 99645-0548

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
451.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02712**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. BEN H. HERMON**

Mailing Address P.O. BOX 548

City PALMER      State AK      Zip Code 99645-0548

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
451.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02713**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**C. MR. VICTOR M. HERNANDEZ**

Mailing Address 108 COMMODORE DRIVE

City JUPITER      State FL      Zip Code 33477-4004

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED      Occupation INVESTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02714**

Amount of Each Receipt this Period  
550.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 651.00

**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 1010 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DAVID G. HERR**

Mailing Address 13 CIRCLE ROAD

City MILLERSVILLE      State PA      Zip Code 17551-1511

FEC ID number of contributing federal political committee. **C**

Name of Employer HMS      Occupation TRANSPORTATION

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
**03 / 27 / 2014**  
**Transaction ID : 2014M04L11AI02715**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. MR. PAUL N. HERR**

Mailing Address 48 ROBIN ROAD

City HERSHEY      State PA      Zip Code 17033-1849

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290.00**

Date of Receipt  
**03 / 07 / 2014**  
**Transaction ID : 2014M04L11AI02716**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. MR. PAUL N. HERR**

Mailing Address 48 ROBIN ROAD

City HERSHEY      State PA      Zip Code 17033-1849

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290.00**

Date of Receipt  
**03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI02717**

Amount of Each Receipt this Period  
**65.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **215.00**

**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 1011 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. PAUL N. HERR**

Mailing Address **48 ROBIN ROAD**

City **HERSHEY**      State **PA**      Zip Code **17033-1849**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290.00**

Date of Receipt  
**03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI02718**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. MR. BRIAN HERSEY**

Mailing Address **5 FALCONS LEDGE DRIVE**

City **LANDRUM**      State **SC**      Zip Code **29356-3107**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**03 / 13 / 2014**  
**Transaction ID : 2014M04L11AI02719**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**C. MR. DANIEL L. HERTZ JR.**

Mailing Address **P.O. BOX 407**

City **RED BANK**      State **NJ**      Zip Code **07701-0407**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SEALS EASTERN, INC.**      Occupation **PRESIDENT**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1351.00**

Date of Receipt  
**03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI02720**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **600.00**

**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 1012 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. DANIEL L. HERTZ JR.</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI02721</b>
Mailing Address P.O. BOX 407		Amount of Each Receipt this Period 101.00
City RED BANK	State NJ	Zip Code 07701-0407
FEC ID number of contributing federal political committee. C		
Name of Employer SEALS EASTERN, INC.	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1351.00	

Full Name (Last, First, Middle Initial) <b>B. MR. WILLIAM HERTZER</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI02722</b>
Mailing Address 85 VALLEY VIEW PLACE		Amount of Each Receipt this Period 200.00
City TIFFIN	State OH	Zip Code 44883-3106
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>C. MS. DOROTHY M. HESKETT</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 07 / 2014 <b>Transaction ID : 2014M04L11AI02723</b>
Mailing Address 12279 RIVERSIDE DRIVE		Amount of Each Receipt this Period 250.00
City WHITE PIGEON	State MI	Zip Code 49099-9129
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	551.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1013 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. MARC HESS**

Mailing Address 1044 ECHO VALLEY COURT

City Loganville State GA Zip Code 30052-2367

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation COMMUNICATION CONSTRUCTION

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02724**

Amount of Each Receipt this Period  
35.00

Full Name (Last, First, Middle Initial)  
**B. MR. MARC HESS**

Mailing Address 1044 ECHO VALLEY COURT

City Loganville State GA Zip Code 30052-2367

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation COMMUNICATION CONSTRUCTION

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02725**

Amount of Each Receipt this Period  
36.00

Full Name (Last, First, Middle Initial)  
**C. MR. JOHN F. HESSMER**

Mailing Address 9 WEEDS LANDING

City Darien State CT Zip Code 06820-5043

FEC ID number of contributing federal political committee. **C**

Name of Employer REAL ESTATE Occupation REAL ESTATE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02726**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 121.00

**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 1014 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN F. HESSMER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 WEEDS LANDING  
 City DARIEN State CT Zip Code 06820-5043  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REAL ESTATE Occupation REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02727**  
 Amount of Each Receipt this Period 115.00

**B. MR. F. STALEY HESTER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 912 DOUGLAS COURT  
 City SALEM State VA Zip Code 24153-2646  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 307.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02728**  
 Amount of Each Receipt this Period 2.00

**C. MR. J. PRESTON HESTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 112 VALLEY RIDGE ROAD  
 City FRANKLIN State TN Zip Code 37064-5260  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02729**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 617.00  
**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 1015 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL C. HETRICK**  
Full Name (Last, First, Middle Initial)

Mailing Address 517 DARTMOOR WAY S.W.

City OCEAN ISLE BEACH	State NC	Zip Code 28469-5424
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
386.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
03	/	04	/	2014

**Transaction ID : 2014M04L11AI02730**

Amount of Each Receipt this Period  
85.00

**B. MR. MICHAEL C. HETRICK**  
Full Name (Last, First, Middle Initial)

Mailing Address 517 DARTMOOR WAY S.W.

City OCEAN ISLE BEACH	State NC	Zip Code 28469-5424
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
386.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
03	/	28	/	2014

**Transaction ID : 2014M04L11AI02731**

Amount of Each Receipt this Period  
101.00

**C. MR. WILLIAM L. HEUBAUM**  
Full Name (Last, First, Middle Initial)

Mailing Address 204 CALUMET DRIVE

City YANKTON	State SD	Zip Code 57078-6751
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

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
03	/	10	/	2014

**Transaction ID : 2014M04L11AI02732**

Amount of Each Receipt this Period  
750.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	936.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1016 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. GAIL HEWILTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 PHILLIPS POND ROAD  
 City NATICK State MA Zip Code 01760-5643  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02733**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. PAUL B. HEWITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7608 WHEATCROFT COURT  
 City BETHESDA State MD Zip Code 20817-5640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AKIN GUMP STRAUSS HAUER & FELD LLP Occupation ATTORNEY  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02734**  
 Amount of Each Receipt this Period  
 500.00

**C. MRS. SHARON HEWITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 743  
 City PINEHURST State ID Zip Code 83850-0743  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CITY OF PINEHURST, IDAHO Occupation CITY CLERK  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02735**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1501.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1017 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. MICHEAL L. HICKEY</b>		Date of Receipt										
Mailing Address 6825 S. PONTIAC COURT		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>03</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	03	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	03	/	2014								
City State Zip Code CENTENNIAL CO 80112-1126		<b>Transaction ID : 2014M04L11AI02736</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer Occupation A.T. & T. COMMUNICATIONS TECHNICIAN		<table border="1"> <tr> <td>255.00</td> </tr> </table>	255.00									
255.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<table border="1"> <tr> <td>50.00</td> </tr> </table>	50.00									
50.00												

Full Name (Last, First, Middle Initial) <b>B. MR. MICHEAL L. HICKEY</b>		Date of Receipt										
Mailing Address 6825 S. PONTIAC COURT		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>21</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	21	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	21	/	2014								
City State Zip Code CENTENNIAL CO 80112-1126		<b>Transaction ID : 2014M04L11AI02737</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer Occupation A.T. & T. COMMUNICATIONS TECHNICIAN		<table border="1"> <tr> <td>30.00</td> </tr> </table>	30.00									
30.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<table border="1"> <tr> <td>255.00</td> </tr> </table>	255.00									
255.00												

Full Name (Last, First, Middle Initial) <b>C. MR. MICHEAL L. HICKEY</b>		Date of Receipt										
Mailing Address 6825 S. PONTIAC COURT		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>24</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	24	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	24	/	2014								
City State Zip Code CENTENNIAL CO 80112-1126		<b>Transaction ID : 2014M04L11AI02738</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer Occupation A.T. & T. COMMUNICATIONS TECHNICIAN		<table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00									
25.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<table border="1"> <tr> <td>255.00</td> </tr> </table>	255.00									
255.00												

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>105.00</td> </tr> </table>	105.00
105.00		
<b>TOTAL</b> This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

**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 1018 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JOYCE M. HICKMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1018 BARNES AVENUE  
 City ALVA State OK Zip Code 73717-2142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02739**  
 Amount of Each Receipt this Period  
 400.00

**B. MR. HAROLD HICKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4011 GROSSE POINT DRIVE  
 City SALISBURY State MD Zip Code 21804-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02740**  
 Amount of Each Receipt this Period  
 30.00

**C. MR. HAROLD HICKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4011 GROSSE POINT DRIVE  
 City SALISBURY State MD Zip Code 21804-2534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02741**  
 Amount of Each Receipt this Period  
 35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	465.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1019 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. MARGARET ANNE HICKS</b>		Date of Receipt
Mailing Address 586 FAIRWOOD DRIVE		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City State Zip Code TALLMADGE OH 44278-2026		<b>Transaction ID : 2014M04L11AI02742</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="261.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MRS. MARGARET ANNE HICKS</b>		Date of Receipt
Mailing Address 586 FAIRWOOD DRIVE		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City State Zip Code TALLMADGE OH 44278-2026		<b>Transaction ID : 2014M04L11AI02743</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="101.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="261.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. MICHAEL HICKS</b>		Date of Receipt
Mailing Address 1140 W. CHESAPEAKE BEACH ROAD		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City State Zip Code OWINGS MD 20736-9219		<b>Transaction ID : 2014M04L11AI02744</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1.00"/>
Name of Employer SELF-EMPLOYED	Occupation PROPERTY MANAGEMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="216.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="152.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 1020 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. W. GLEN HICKS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 13 / 2014 <b>Transaction ID : 2014M04L11AI02745</b>
Mailing Address 809 KENNON STREET		Amount of Each Receipt this Period 405.00
City MINDEN	State LA	Zip Code 71055-2311
FEC ID number of contributing federal political committee. C	Name of Employer RETIRE Occupation RETIRE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2550.00	

Full Name (Last, First, Middle Initial) <b>B. MR. W. GLEN HICKS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI02746</b>
Mailing Address 809 KENNON STREET		Amount of Each Receipt this Period 405.00
City MINDEN	State LA	Zip Code 71055-2311
FEC ID number of contributing federal political committee. C	Name of Employer RETIRE Occupation RETIRE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2550.00	

Full Name (Last, First, Middle Initial) <b>C. MR. HORACE HIGGINS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI02747</b>
Mailing Address P.O. BOX 112		Amount of Each Receipt this Period 101.00
City BURNSVILLE	State NC	Zip Code 28714-0112
FEC ID number of contributing federal political committee. C	Name of Employer RETIRE Occupation RETIRE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	911.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1021 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES HIGGINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1400 HARPER ROAD  
 City State Zip Code  
 BECKLEY WV 25801-3306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF - EMPLOYED ATTORNEY  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02748**  
 Amount of Each Receipt this Period  
 250.00

**B. MS. JENNIFER HIGGINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 KENILWORTH DRIVE  
 City State Zip Code  
 SHORT HILLS NJ 07078-1607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NOT EMPLOYED HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02749**  
 Amount of Each Receipt this Period  
 250.00

**C. MS. JENNIFER HIGGINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 KENILWORTH DRIVE  
 City State Zip Code  
 SHORT HILLS NJ 07078-1607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NOT EMPLOYED HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02750**  
 Amount of Each Receipt this Period  
 300.00

**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 1022 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. FRANK A. HIGGINSON</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 04 / 2014 <b>Transaction ID : 2014M04L11AI02751</b>
Mailing Address 1337 MARY JO DRIVE		Amount of Each Receipt this Period 85.00
City GARDNERVILLE	State NV	Zip Code 89460-8440
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 85.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

Full Name (Last, First, Middle Initial) <b>B. MR. FRANK A. HIGGINSON</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI02752</b>
Mailing Address 1337 MARY JO DRIVE		Amount of Each Receipt this Period 35.00
City GARDNERVILLE	State NV	Zip Code 89460-8440
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

Full Name (Last, First, Middle Initial) <b>C. MR. LOUIS HIGHTOWER</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI02753</b>
Mailing Address 1114 BURNING TREE DRIVE		Amount of Each Receipt this Period 75.00
City CHAPEL HILL	State NC	Zip Code 27517-4004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	195.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1023 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LOUIS HIGHTOWER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1114 BURNING TREE DRIVE

City CHAPEL HILL State NC Zip Code 27517-4004

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02754**

Amount of Each Receipt this Period  
 1.00

**B. MRS. SHIRLEY ANN HIGHTOWER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 VILLAGE WALK COURT

City PONTE VEDRA BEACH State FL Zip Code 32082-3541

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02755**

Amount of Each Receipt this Period  
 200.00

**C. MR. GANUS HILBURN**  
Full Name (Last, First, Middle Initial)

Mailing Address 230 APPLE AVENUE

City HAMILTON State AL Zip Code 35570-3542

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02756**

Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	321.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1024 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GANUS HILBURN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 230 APPLE AVENUE  
 City HAMILTON State AL Zip Code 35570-3542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02757**  
 Amount of Each Receipt this Period 100.00

**B. MRS. JOYCE B. HILDEBRAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7855 LILLY CHAPEL GEORGESVILLE ROA  
 City LONDON State OH Zip Code 43140-9461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02758**  
 Amount of Each Receipt this Period 200.00

**C. DR. JOHN A. HILDRETH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2142 CARIB CIRCLE  
 City PALM BEACH GARDENS State FL Zip Code 33410-2074  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02759**  
 Amount of Each Receipt this Period 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1025 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. WILLIAM W. HILDRETH</b>		Date of Receipt 03 / 28 / 2014 <b>Transaction ID : 2014M04L11AI02760</b>
Mailing Address 386 SUNSET DRIVE		Amount of Each Receipt this Period 150.00
City ENCINITAS	State CA	Zip Code 92024-2637
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. MR. BRADLEY A. HILL</b>		Date of Receipt 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI02761</b>
Mailing Address P.O. BOX 173		Amount of Each Receipt this Period 101.00
City MEDINA	State WA	Zip Code 98039-0173
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 421.00	

Full Name (Last, First, Middle Initial) <b>C. MR. FREDERICK T. HILL</b>		Date of Receipt 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI02762</b>
Mailing Address 14132 W. 4TH AVENUE		Amount of Each Receipt this Period 120.00
City GOLDEN	State CO	Zip Code 80401-5218
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	371.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1026 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. FREDERICK T. HILL**

Mailing Address 14132 W. 4TH AVENUE

City GOLDEN State CO Zip Code 80401-5218

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02763**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MS. JESSIE J. HILL**

Mailing Address 1924 W. ASHBURY LANE

City INVERNESS State IL Zip Code 60067-4796

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
376.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02764**

Amount of Each Receipt this Period  
131.00

Full Name (Last, First, Middle Initial)  
**C. MR. JOHN R. HILL**

Mailing Address 668 BLACKBERRY TRAIL #1980

City SAPPHIRE State NC Zip Code 28774-7755

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02765**

Amount of Each Receipt this Period  
220.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 451.00

**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 1027 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. K. C. HILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1812

City GALESBURG	State IL	Zip Code 61402-1812
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer B.N.S.F. RAILROAD	Occupation RAILROAD LOCOMOTIVE ENGINEER
---------------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02766**

Amount of Each Receipt this Period  
 500.00

**B. MRS. KATHY A. HILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7601 PINE LAKE ROAD

City LINCOLN	State NE	Zip Code 68516-4066
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer STUDENT	Occupation STUDENT
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02767**

Amount of Each Receipt this Period  
 120.00

**C. MR. RICHARD HILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 LONGWOOD DRIVE APT 370

City WESTWOOD	State MA	Zip Code 02090-1144
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02768**

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1120.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1028 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD M. HILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26 N.W. 24TH STREET  
 City DELRAY BEACH State FL Zip Code 33444-4316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer J/B INDUSTRIES, INC. Occupation ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI02769**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. RUSH N. HILL II**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1821 KINGS ROAD  
 City NEWPORT BEACH State CA Zip Code 92663-5002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NEWPORT RESOURCE MANAGEMENT, INC. Occupation REAL ESTATE CONSULTANT / ARCHITECT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02770**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. SYLVIA HILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 N. U.S. HIGHWAY 1 APARTMENT 117  
 City TEQUESTA State FL Zip Code 33469-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02771**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	451.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1029 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TIMOTHY P. HILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 80 LANE 270A CROOKED LAKE  
 City ANGOLA State IN Zip Code 46703-7101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation SMALL BUSINESS OWNER  
 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  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02772**  
 Amount of Each Receipt this Period  
 100.00

**B. DR. DENNIS HILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 518  
 City JACKSON State NH Zip Code 03846-0518  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ORTHODONTIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02773**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. MARJORIE HILLGREN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1200 N. ARMSTRONG COURT  
 City DERBY State KS Zip Code 67037-2805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02774**  
 Amount of Each Receipt this Period  
 26.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	376.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1030 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD JOSEPH HILLINGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3904 COLONEL ELLIS AVENUE  
 City ALEXANDRIA State VA Zip Code 22304-1704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02775**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. EDWARD JOSEPH HILLINGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3904 COLONEL ELLIS AVENUE  
 City ALEXANDRIA State VA Zip Code 22304-1704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02776**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. EDWARD JOSEPH HILLINGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3904 COLONEL ELLIS AVENUE  
 City ALEXANDRIA State VA Zip Code 22304-1704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02777**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 1031 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID MCL. HILLMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 713 SAINT JAMES STREET  
 City PITTSBURGH State PA Zip Code 15232-1436  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer P.N.C. EQUITY MANAGEMENT Occupation INVESTMENT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02778**  
 Amount of Each Receipt this Period  
 450.00

**B. MR. SALLY HILSHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1626 RIVERSIDE DR  
 City WILLIAMSPORT State PA Zip Code 17702-7041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02779**  
 Amount of Each Receipt this Period  
 350.00

**C. MRS. SANDRA B. HILST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26772 HICKORY BLVD.  
 City BONITA SPRINGS State FL Zip Code 34134-8301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LA-Z BOY FURNITURE GALLERIES Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02780**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1032 OF 2949
	<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. LEO P. HINCHY</b>		Date of Receipt
Mailing Address 210 PHILADELPHIA COURT		M M M / D D D / Y Y Y Y Y Y 03 / 11 / 2014
City	State	Zip Code
PALM HARBOR	FL	34684-1323
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI02781</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		70.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	281.00	

Full Name (Last, First, Middle Initial) <b>B. MR. LEO P. HINCHY</b>		Date of Receipt
Mailing Address 210 PHILADELPHIA COURT		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City	State	Zip Code
PALM HARBOR	FL	34684-1323
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI02782</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		71.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	281.00	

Full Name (Last, First, Middle Initial) <b>C. MR. CHARLES HINDES</b>		Date of Receipt
Mailing Address 14124 HALPER ROAD		M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014
City	State	Zip Code
POWAY	CA	92064-2813
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI02783</b>
Name of Employer REQUESTED		Amount of Each Receipt this Period
Occupation REQUESTED		200.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	341.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1033 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MATTHEW HINDIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 333 EAST 5TH STREET  
APARTMENT B3

City NEW YORK State NY Zip Code 10003-8776

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAPIRO, DICARO & BARAK L.L.C. Occupation ATTORNEY

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  
03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02784**

Amount of Each Receipt this Period  
100.00

**B. MRS. BEVERLY J. HINDS**  
Full Name (Last, First, Middle Initial)

Mailing Address 5100 JOHN D. RYAN BLVD.  
APARTMENT 744

City SAN ANTONIO State TX Zip Code 78245-3506

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02785**

Amount of Each Receipt this Period  
250.00

**C. MR. BILLY B. HINES**  
Full Name (Last, First, Middle Initial)

Mailing Address 3815 MINTWOOD DRIVE

City MINT HILL State NC Zip Code 28227-8233

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 531.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02786**

Amount of Each Receipt this Period  
110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 460.00

**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 1034 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. BILLY B. HINES</b>		Date of Receipt
Mailing Address 3815 MINTWOOD DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014
City State Zip Code MINT HILL NC 28227-8233		<b>Transaction ID : 2014M04L11AI02787</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 531.00	

Full Name (Last, First, Middle Initial) <b>B. MR. BILLY B. HINES</b>		Date of Receipt
Mailing Address 3815 MINTWOOD DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City State Zip Code MINT HILL NC 28227-8233		<b>Transaction ID : 2014M04L11AI02788</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 111.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 531.00	

Full Name (Last, First, Middle Initial) <b>C. MR. JOHN P. HINKLEMAN</b>		Date of Receipt
Mailing Address 952 LYTTLE STREET		M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2014
City State Zip Code REDLANDS CA 92374-6241		<b>Transaction ID : 2014M04L11AI02789</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 125.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	436.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1035 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN L. HINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 106 BENT OAK CIRCLE  
 City THOMASVILLE State GA Zip Code 31757-9507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02790**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. JOHN L. HINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 106 BENT OAK CIRCLE  
 City THOMASVILLE State GA Zip Code 31757-9507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02791**  
 Amount of Each Receipt this Period  
 120.00

**C. KRISTY HINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. DRAWER 490  
 City GILMER State TX Zip Code 75644-0490  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02792**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	470.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1036 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. CATHERINE HINTERBUCHNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 720 MILTON ROAD  
 City RYE State NY Zip Code 10580-3270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02793**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. KATHLEEN HINTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 119 CHAMPLIN RIDGE ROAD  
 City ROCHESTER State NH Zip Code 03867-5223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02794**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. KATHLEEN HINTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 119 CHAMPLIN RIDGE ROAD  
 City ROCHESTER State NH Zip Code 03867-5223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02795**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 251.00  
**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 1037 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KATHLEEN HINTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 119 CHAMPLIN RIDGE ROAD  
 City ROCHESTER State NH Zip Code 03867-5223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02796**  
 Amount of Each Receipt this Period 110.00

**B. MR. ROBERT HINTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15009 FANNING MANOR CT.  
 City CHARLOTTE State NC Zip Code 28277-2850  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CBRE, INC. Occupation COMMERCIAL REAL ESTATE BROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02797**  
 Amount of Each Receipt this Period 500.00

**C. MR. EUGENE HIONAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6015 5TH AVENUE #A  
 City BROOKLYN State NY Zip Code 11220-4011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI02798**  
 Amount of Each Receipt this Period 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	860.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1038 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. SFC RUSSELL W. HIPPLEWITZ U.S.A. (RE)**

Mailing Address 120 OAK PINES BLVD.

City PEMBERTON	State NJ	Zip Code 08068-1905
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI02799**

Amount of Each Receipt this Period  
65.00

Full Name (Last, First, Middle Initial)  
**B. MR. DAVID M. HIRT**

Mailing Address 1409 LADYBANK COURT

City BEL AIR	State MD	Zip Code 21015-2100
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation LAWYER
-----------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02800**

Amount of Each Receipt this Period  
265.00

Full Name (Last, First, Middle Initial)  
**C. MR. ROBERT L. HITECHEW**

Mailing Address 1115 TUMBLEWEED AVENUE

City LAS VEGAS	State NV	Zip Code 89106-1423
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02801**

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	530.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1039 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BETTY JOAN HITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2029 RHODE ISLAND AVENUE  
 City State Zip Code  
 MCLEAN VA 22101-4920  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02802**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. LELAND LEON HITTLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 937 ALEXA WAY  
 City State Zip Code  
 FORT COLLINS CO 80526-4359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02803**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. LELAND LEON HITTLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 937 ALEXA WAY  
 City State Zip Code  
 FORT COLLINS CO 80526-4359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02804**  
 Amount of Each Receipt this Period  
 51.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	221.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1040 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. DAVID F. HITZEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 56915 E. ELMWOOD ROAD  
 City State Zip Code  
 MONKEY ISLAND OK 74331-8315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 OHIO STATE UNIVERSITY PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02805**  
 Amount of Each Receipt this Period  
 100.00

**B. DR. DAVID F. HITZEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 56915 E. ELMWOOD ROAD  
 City State Zip Code  
 MONKEY ISLAND OK 74331-8315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 OHIO STATE UNIVERSITY PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02806**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. LAWRENCE HIXON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5215 PASEO CAMEO  
 City State Zip Code  
 SANTA BARBARA CA 93111-1133  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02807**  
 Amount of Each Receipt this Period  
 275.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 476.00  
**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 1041 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. HENRY R. HOBBS</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 12 / 2014 <b>Transaction ID : 2014M04L11AI02808</b>
Mailing Address 47 WINE DALE LANE		Amount of Each Receipt this Period 250.00
City NAPA State CA Zip Code 94558-6714	FEC ID number of contributing federal political committee. C	
Name of Employer SHARE FINANCIAL Occupation INVESTMENT BANKER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

Full Name (Last, First, Middle Initial) <b>B. MR. H. LEE S. HOBSON</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI02809</b>
Mailing Address 4237 ARMSTRONG PKWY		Amount of Each Receipt this Period 32400.00
City DALLAS State TX Zip Code 75205-3715	FEC ID number of contributing federal political committee. C	
Name of Employer HIGHSIDE CAPITAL Occupation INVESTMENT MANAGEMENT	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 32400.00

Full Name (Last, First, Middle Initial) <b>C. MR. WILLIAM HOBSON</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 28 / 2014 <b>Transaction ID : 2014M04L11AI02810</b>
Mailing Address 221 S. PHILLIPS AVENUE SUITE 205		Amount of Each Receipt this Period 100.00
City SIOUX FALLS State SD Zip Code 57104-6339	FEC ID number of contributing federal political committee. C	
Name of Employer SELF-EMPLOYED Occupation REAL ESTATE	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1042 OF 2949
	<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	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. JACK A. HOCKEMA</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014 <b>Transaction ID : 2014M04L11AI02811</b>		
Mailing Address P.O. BOX 3207			Amount of Each Receipt this Period 5000.00		
City MISSION VIEJO	State CA	Zip Code 92690-1207			
FEC ID number of contributing federal political committee. C					
Name of Employer KAISER ALUMINUM CORPORATION		Occupation C.E.O.			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00			

Full Name (Last, First, Middle Initial) <b>B. MR. JOHN HOCKER</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2014 <b>Transaction ID : 2014M04L11AI02812</b>		
Mailing Address 6112 GOLDTREE WAY			Amount of Each Receipt this Period 151.00		
City BETHESDA	State MD	Zip Code 20817-5839			
FEC ID number of contributing federal political committee. C					
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 251.00			

Full Name (Last, First, Middle Initial) <b>C. MR. RALPH S. HODGES</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI02813</b>		
Mailing Address 299 SUNSHINE LAKE ROAD			Amount of Each Receipt this Period 25.00		
City MIDWAY	State GA	Zip Code 31320-4499			
FEC ID number of contributing federal political committee. C					
Name of Employer D.O.D.		Occupation ENGINEERING TECHNICIAN			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 235.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5176.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1043 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RALPH S. HODGES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 299 SUNSHINE LAKE ROAD  
 City MIDWAY State GA Zip Code 31320-4499  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer D.O.D. Occupation ENGINEERING TECHNICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02814**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. RALPH HODGKINS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 COCO PLUM DRIVE APARTMENT 402  
 City MARATHON State FL Zip Code 33050-4028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02815**  
 Amount of Each Receipt this Period  
 400.00

**C. MR. RUDOLF J. HOEFLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17 TALL OAKS ROAD  
 City WILTON State CT Zip Code 06897-1337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02816**  
 Amount of Each Receipt this Period  
 90.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	590.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1044 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RUDOLF J. HOEFLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17 TALL OAKS ROAD  
 City WILTON State CT Zip Code 06897-1337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02817**  
 Amount of Each Receipt this Period  
 70.00

**B. MR. FRANK J. HOENEMEYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 97 CAPTAINS WALK  
 City NORTH CHATHAM State MA Zip Code 02650-1041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI02818**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. HARRY R. HOERR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3028 ARBORCREEK DRIVE  
 City MONTGOMERY State OH Zip Code 45242-6357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02819**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1045 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. MAX P. HOERR</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI02820</b>
Mailing Address 1921 W. COURTSIDE DRIVE		Amount of Each Receipt this Period 1.00
City PEORIA	State IL	Zip Code 61614-1263
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>B. MR. CORY D. HOFFMAN</b>		Date of Receipt 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI02821</b>
Mailing Address 4482 SKYLARK LANE		Amount of Each Receipt this Period 101.00
City GREENDALE	State WI	Zip Code 53129-2906
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. MARY HOFFMAN</b>		Date of Receipt 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI02822</b>
Mailing Address 20 BEL GIORNO COURT		Amount of Each Receipt this Period 150.00
City HENDERSON	State NV	Zip Code 89011-2806
FEC ID number of contributing federal political committee. C		
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	252.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1046 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. TWILA J. HOFFMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3221 WINDBREAK CIRCLE  
 City State Zip Code  
 MANHATTAN KS 66503-2436  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02823**  
 Amount of Each Receipt this Period  
 200.00

**B. MRS. JULIANN T. HOFFMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16338 SHANNONDELL DRIVE  
 City State Zip Code  
 NORRISTOWN PA 19403-5614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 621.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02824**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. MARK HOFFMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3402 CALENDAR BROOK ROAD  
 City State Zip Code  
 SUTTON VT 05867-4400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02825**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	301.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1047 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARK HOFFMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3402 CALENDAR BROOK ROAD  
 City SUTTON State VT Zip Code 05867-4400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02826**  
 Amount of Each Receipt this Period  
 101.00

**B. MR. RICHARD M. HOFFMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4065 W. EAGLEROCK DRIVE  
 City WENATCHEE State WA Zip Code 98801-9072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02827**  
 Amount of Each Receipt this Period  
 250.00

**C. MS. MAY LOIS HOFFMEYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7120 KING SOLOMONS COURT  
 City LAS VEGAS State NV Zip Code 89117-3811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02828**  
 Amount of Each Receipt this Period  
 35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	386.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1048 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MAY LOIS HOFFMEYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7120 KING SOLOMONS COURT  
 City LAS VEGAS State NV Zip Code 89117-3811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02829**  
 Amount of Each Receipt this Period  
 30.00

**B. MS. MAY LOIS HOFFMEYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7120 KING SOLOMONS COURT  
 City LAS VEGAS State NV Zip Code 89117-3811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02830**  
 Amount of Each Receipt this Period  
 31.00

**C. MS. CONSTANCE B. HOFKIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4100 GALT OCEAN DR  
 APT 1101  
 City FT LAUDERDALE State FL Zip Code 33308-6029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02831**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 86.00  
**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 1049 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CONSTANCE B. HOFKIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4100 GALT OCEAN DR  
 APT 1101  
 City FT LAUDERDALE State FL Zip Code 33308-6029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02832**  
 Amount of Each Receipt this Period  
 25.00

**B. MS. CONSTANCE B. HOFKIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4100 GALT OCEAN DR  
 APT 1101  
 City FT LAUDERDALE State FL Zip Code 33308-6029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02833**  
 Amount of Each Receipt this Period  
 25.00

**C. MS. CONSTANCE B. HOFKIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4100 GALT OCEAN DR  
 APT 1101  
 City FT LAUDERDALE State FL Zip Code 33308-6029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02834**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1051 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. HARVEY JAMES HOGUE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 13 / 2014 <b>Transaction ID : 2014M04L11AI02838</b>
Mailing Address 23 WILLWAY AVENUE		Amount of Each Receipt this Period 120.00
City RICHMOND	State VA	Zip Code 23226-1333
FEC ID number of contributing federal political committee.	C	
Name of Employer JM CORPORTATION	Occupation MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>B. MR. ROBERT I. HOIDAHL JR.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI02839</b>
Mailing Address 8529 LIBERTY HALL DRIVE		Amount of Each Receipt this Period 101.00
City MIDLAND	State GA	Zip Code 31820-4294
FEC ID number of contributing federal political committee.	C	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

Full Name (Last, First, Middle Initial) <b>C. MR. ROBERT I. HOIDAHL JR.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI02840</b>
Mailing Address 8529 LIBERTY HALL DRIVE		Amount of Each Receipt this Period 220.00
City MIDLAND	State GA	Zip Code 31820-4294
FEC ID number of contributing federal political committee.	C	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	441.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1052 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. CAITLIN D. HOIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 330 FULLER AVENUE  
STE. 1

City HELENA State MT Zip Code 59601

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02841**

Amount of Each Receipt this Period  
500.00

**B. THE HONORA GLEN A. HOLDEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 301 N LAKE AVE  
SUITE 900

City PASADENA State CA Zip Code 91101-4107

FEC ID number of contributing federal political committee. **C**

Name of Employer THE HOLDEN COMPANY Occupation INVESTMENTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32400.00

Date of Receipt  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02842**

Amount of Each Receipt this Period  
32400.00

**C. MRS. GLORIA ANN HOLDEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 301 N LAKE AVE  
SUITE 900

City PASADENA State CA Zip Code 91101-4107

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32400.00

Date of Receipt  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02843**

Amount of Each Receipt this Period  
32400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 65300.00

**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 1053 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HARRY R. HOLDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1770 8TH STREET  
 City LOS OSOS State CA Zip Code 93402-2221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SIERRA VISTA HOSPITAL Occupation LAB TECHNICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02844**  
 Amount of Each Receipt this Period  
 60.00

**B. MR. HARRY R. HOLDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1770 8TH STREET  
 City LOS OSOS State CA Zip Code 93402-2221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SIERRA VISTA HOSPITAL Occupation LAB TECHNICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02845**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. JOHN S. HOLDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 44434 ASPEN RIDGE DRIVE  
 City NORTHVILLE State MI Zip Code 48168-4427  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02846**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	211.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1054 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RALPH H. HOLDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1017 COE STREET  
 City ALTUS State OK Zip Code 73521-6918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02847**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. RALPH H. HOLDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1017 COE STREET  
 City ALTUS State OK Zip Code 73521-6918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02848**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. WILLIAM E. HOLE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 122  
 6469 WESTFALL ROAD  
 City GREENVILLE State OH Zip Code 45331-0122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02849**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 1055 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID HOLLAHAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 712 THORNWOOD WAY  
 City HINESVILLE State GA Zip Code 31313-3406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2001.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02850**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. DAVID HOLLAHAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 712 THORNWOOD WAY  
 City HINESVILLE State GA Zip Code 31313-3406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2001.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02851**  
 Amount of Each Receipt this Period  
 501.00

**C. MS LYNETTE HOLLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11526 N. 146TH AVENUE  
 City SURPRISE State AZ Zip Code 85379-4434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI02852**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1101.00  
**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 1056 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARC P. HOLLAND**  
Full Name (Last, First, Middle Initial)

Mailing Address 1225 MARY HILL CIRCLE

City HARTLAND State WI Zip Code 53029-8006

FEC ID number of contributing federal political committee. **C**

Name of Employer INPRO CORPORATION Occupation EVP SALES AND MARKETING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02853**

Amount of Each Receipt this Period  
 25000.00

**B. MR. JOHN H. HOLLIDAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 341 INDIAN HARBOR ROAD

City VERO BEACH State FL Zip Code 32963-3510

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02854**

Amount of Each Receipt this Period  
 1000.00

**C. MRS. CAROLYN D. HOLLIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1610 N. VALENCIA DRIVE

City ALBANY State GA Zip Code 31707-3733

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02855**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	26250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1057 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. JAMES W. HOLMAN**

Mailing Address 909 FOX RUN

City MOBERLY State MO Zip Code 65270-2475

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02856**

Amount of Each Receipt this Period  
150.00

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT E. HOLMAN**

Mailing Address P.O. BOX 25

City CHAMPION State NE Zip Code 69023-0025

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI02857**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**C. MR. LELAND B. HOLMES**

Mailing Address 18304 GULF BLVD.  
APARTMENT 416

City REDINGTON SHORES State FL Zip Code 33708-1054

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02858**

Amount of Each Receipt this Period  
51.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 321.00

**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 1058 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. STEPHEN HOLODAK**

Mailing Address 5 SUNCLIFF DRIVE

City State Zip Code  
TARRYTOWN NY 10591-3444

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MEDCO HEALTH SOLUTIONS, INC. VICE PRESIDENT

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02859**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. JEFFREY ALAN HOLSATHER**

Mailing Address 24509 TIGGER LANE

City State Zip Code  
SAINT ROBERT MO 65584-3806

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02860**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**C. MR. JEFFREY ALAN HOLSATHER**

Mailing Address 24509 TIGGER LANE

City State Zip Code  
SAINT ROBERT MO 65584-3806

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02861**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 420.00

**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 1059 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GERALD A. HOLT**  
Full Name (Last, First, Middle Initial)

Mailing Address 5555 OCTONIA PLACE

City SARASOTA State FL Zip Code 34238-6219

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 331.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02862**

Amount of Each Receipt this Period  
 331.00

**B. MRS. MADELYN I. HOLTZCLAW**  
Full Name (Last, First, Middle Initial)

Mailing Address 27759 CARLYLE SPRINGS ROAD

City KEENE State CA Zip Code 93531-1326

FEC ID number of contributing federal political committee. **C**

Name of Employer E. & B. NATURAL RESOURCES Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02863**

Amount of Each Receipt this Period  
 100.00

**C. MRS. LYNDA L. HON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1904 PARKHILL ROAD SE

City HUNTSVILLE State AL Zip Code 35801-1334

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02864**

Amount of Each Receipt this Period  
 70.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 501.00

**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 1060 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LYNDA L. HON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1904 PARKHILL ROAD SE  
 City HUNTSVILLE State AL Zip Code 35801-1334  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **240.00**

Date of Receipt: **03 / 13 / 2014**  
**Transaction ID : 2014M04L11AI02865**  
 Amount of Each Receipt this Period: **100.00**

**B. MR. W. E. HONEY JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 917  
 City CONYERS State GA Zip Code 30012-0917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **LTL. COMPANY** Occupation: **EXECUTIVE**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **500.00**

Date of Receipt: **03 / 14 / 2014**  
**Transaction ID : 2014M04L11AI02866**  
 Amount of Each Receipt this Period: **500.00**

**C. MR. EDWARD E. HOOD JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11674 LAKE HOUSE COURT  
 City NORTH PALM BEACH State FL Zip Code 33408-3318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **401.00**

Date of Receipt: **03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI02867**  
 Amount of Each Receipt this Period: **1.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **601.00**  
**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 1061 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DARWIN HOOGENDOORN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3230 CHESTNUT AVENUE  
 City State Zip Code  
 ROCK VALLEY IA 51247-7401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF - EMPLOYED FARMER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02868**  
 Amount of Each Receipt this Period  
 250.00

**B. DR. CARL T. HOOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1916 WHISPERING PINES CIRCLE  
 City State Zip Code  
 NORMAN OK 73072-6909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PLICO PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02869**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. GRANT E. HOOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 122 IRIS DRIVE  
 City State Zip Code  
 CEDAR FALLS IA 50613-6311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02870**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 470.00  
**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 1062 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HAROLD S. HOOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 WESTCOTT STREET  
 UNIT 1102  
 City HOUSTON State TX Zip Code 77007-7095  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02871**  
 Amount of Each Receipt this Period  
 2000.00

**B. MRS. BONNIE HOOPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 KINGSTON DRIVE  
 City LITTLE ROCK State AR Zip Code 72227-2237  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02872**  
 Amount of Each Receipt this Period  
 125.00

**C. CHIEF JUST PERRY HOOPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3191 THOMAS AVENUE  
 City MONTGOMERY State AL Zip Code 36106-2425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02873**  
 Amount of Each Receipt this Period  
 235.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2360.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1063 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SAMUEL P. HOOPES JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 757  
 74 FISH POINT  
 City BOLTON LANDING State NY Zip Code 12814-0757  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02874**  
 Amount of Each Receipt this Period  
 250.00

**B. MS. JANICE L. HOOSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4308 S.W. FRASER AVENUE  
 City PORTLAND State OR Zip Code 97225-1911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02875**  
 Amount of Each Receipt this Period  
 750.00

**C. MS. BONNIE HOOVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 720  
 City PAGOSA SPRINGS State CO Zip Code 81147-0720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02876**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1064 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. BONNIE HOOVER</b>		Date of Receipt										
Mailing Address P.O. BOX 720		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>26</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	26	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	26	/	2014								
City State Zip Code PAGOSA SPRINGS CO 81147-0720		<b>Transaction ID : 2014M04L11AI02877</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer Occupation RETIRED RETIRED		<table border="1"> <tr> <td>Amount</td> <td>1.00</td> </tr> </table>	Amount	1.00								
Amount	1.00											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"> <tr> <td>201.00</td> </tr> </table>	201.00										
201.00												

Full Name (Last, First, Middle Initial) <b>B. MS. DELORES M. HOOVER</b>		Date of Receipt										
Mailing Address 4514 N. WATERSIDE DRIVE		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>12</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	12	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	12	/	2014								
City State Zip Code CLOVIS CA 93619-4703		<b>Transaction ID : 2014M04L11AI02878</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer Occupation SELF-EMPLOYED REQUESTED		<table border="1"> <tr> <td>Amount</td> <td>250.00</td> </tr> </table>	Amount	250.00								
Amount	250.00											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00										
250.00												

Full Name (Last, First, Middle Initial) <b>C. MR. DUANE L. HOOVER</b>		Date of Receipt										
Mailing Address 320 RIVERHALL COURT		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>26</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	26	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	26	/	2014								
City State Zip Code ATLANTA GA 30350-3729		<b>Transaction ID : 2014M04L11AI02879</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer Occupation HOOVER FOODS OWNER		<table border="1"> <tr> <td>Amount</td> <td>315.00</td> </tr> </table>	Amount	315.00								
Amount	315.00											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"> <tr> <td>315.00</td> </tr> </table>	315.00										
315.00												

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>566.00</td> </tr> </table>	566.00
566.00		
<b>TOTAL</b> This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

**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 1065 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEPHEN A. HORN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5050 LOWER SHORE DRIVE  
 City HARBOR SPRINGS State MI Zip Code 49740-8929  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02880**  
 Amount of Each Receipt this Period 200.00

**B. MR. STEPHEN A. HORN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5050 LOWER SHORE DRIVE  
 City HARBOR SPRINGS State MI Zip Code 49740-8929  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02881**  
 Amount of Each Receipt this Period 250.00

**C. MR. CLYDE V. HORNBACK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 908  
 City KEMAH State TX Zip Code 77565-0908  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02882**  
 Amount of Each Receipt this Period 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1066 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RODNEY WADE HORNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29557 E. CR 2400 N

City MANITO	State IL	Zip Code 61546-7945
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02883**

Amount of Each Receipt this Period  
 100.00

**B. MR. RODNEY WADE HORNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29557 E. CR 2400 N

City MANITO	State IL	Zip Code 61546-7945
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02884**

Amount of Each Receipt this Period  
 120.00

**C. MR. D. GREGORY HARRIGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11165 OLD HARBOUR ROAD

City NORTH PALM BEACH	State FL	Zip Code 33408-3421
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SILGAN HOLDINGS, INC.	Occupation CO-CHAIRMAN OF THE BOARD
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02885**

Amount of Each Receipt this Period  
 32200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	32420.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1067 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. WILSON H. HORSLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14 EVERGREEN LANE  
 City ANDOVER State MA Zip Code 01810-4411  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02886**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. MARION R. HORST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2060 WATERFORD DRIVE  
 City LANCASTER State PA Zip Code 17601-5458  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02887**  
 Amount of Each Receipt this Period  
 125.00

**C. MR. JEFFERY ALAN HORSTMEIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5163 W. OLIVE AVENUE  
 City FRESNO State CA Zip Code 93722-9746  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02888**  
 Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 260.00  
**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 1068 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JEFFERY ALAN HORSTMEIER**

Mailing Address 5163 W. OLIVE AVENUE

City State Zip Code  
FRESNO CA 93722-9746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02889**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**B. MR. JEFFERY ALAN HORSTMEIER**

Mailing Address 5163 W. OLIVE AVENUE

City State Zip Code  
FRESNO CA 93722-9746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02890**

Amount of Each Receipt this Period  
30.00

Full Name (Last, First, Middle Initial)  
**C. MR. JEFFERY ALAN HORSTMEIER**

Mailing Address 5163 W. OLIVE AVENUE

City State Zip Code  
FRESNO CA 93722-9746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02891**

Amount of Each Receipt this Period  
26.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 81.00

**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 1069 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JEFFERY ALAN HORSTMEIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5163 W. OLIVE AVENUE  
 City FRESNO State CA Zip Code 93722-9746  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02892**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. BERNARD HORTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 120 LA JOYA DR  
 City NIPOMO State CA Zip Code 93444-8902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02893**  
 Amount of Each Receipt this Period  
 750.00

**C. MR. FREMONT L. HOTCHKISS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14934 E. OUTER SPRINGER LOOP ROAD  
 APARTMENT R.  
 City PALMER State AK Zip Code 99645-9046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02894**  
 Amount of Each Receipt this Period  
 70.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	845.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1070 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. FREMONT L. HOTCHKISS**

Mailing Address 14934 E. OUTER SPRINGER LOOP ROAD  
APARTMENT R.

City PALMER State AK Zip Code 99645-9046

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02895**

Amount of Each Receipt this Period  
71.00

Full Name (Last, First, Middle Initial)  
**B. MR. WINCHESTER HOTCHKISS**

Mailing Address 154 S. BEACH ROAD

City HOBE SOUND State FL Zip Code 33455-2436

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
346.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02896**

Amount of Each Receipt this Period  
30.00

Full Name (Last, First, Middle Initial)  
**C. MR. WINCHESTER HOTCHKISS**

Mailing Address 154 S. BEACH ROAD

City HOBE SOUND State FL Zip Code 33455-2436

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
346.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02897**

Amount of Each Receipt this Period  
60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 161.00

**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 1071 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WINCHESTER HOTCKISS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 154 S. BEACH ROAD  
 City HOBE SOUND State FL Zip Code 33455-2436  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02898**  
 Amount of Each Receipt this Period 1.00

**B. MS. JANIS SAMS HOUDEK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2014 Q. STREET  
 City BELLEVILLE State KS Zip Code 66935-2345  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02899**  
 Amount of Each Receipt this Period 1000.00

**C. MR. JAMES R. HOUGHTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 80 EAST MARKET STREET SUITE 201  
 City CORNING State NY Zip Code 14830-2722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02900**  
 Amount of Each Receipt this Period 15000.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 16001.00  
**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 1072 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALONZO HOUSEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1633 CRESTVIEW AVENUE  
 City COLUMBIA State SC Zip Code 29223-3645  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VOLUNTEER Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02901**  
 Amount of Each Receipt this Period 150.00

**B. MR. ERNEST O. HOUSEMAN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1709 ANTIGUA DRIVE  
 City ORLANDO State FL Zip Code 32806-1504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02902**  
 Amount of Each Receipt this Period 200.00

**C. MRS. CAREN HOUSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1522 CHEYENNE DRIVE  
 City RICHARDSON State TX Zip Code 75080-2965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02903**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 1073 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. NORMAN G. HOUSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 925  
 City NASHVILLE State GA Zip Code 31639-0923  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02904**  
 Amount of Each Receipt this Period  
 275.00

**B. MRS. BETTY J. HOWARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11607 REGENCY DRIVE  
 City POTOMAC State MD Zip Code 20854-3737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STEVEN JOE,DDS Occupation DENTAL HYGIENIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02905**  
 Amount of Each Receipt this Period  
 240.00

**C. MR. DANIEL KEITH HOWARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 296  
 City KEITHVILLE State LA Zip Code 71047-0296  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02906**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	765.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1074 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JACKSON HOWARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 6329 PENNSBORO DR

City MECHANICSBURG State PA Zip Code 17050-2323

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02907**

Amount of Each Receipt this Period  
 500.00

**B. MR. JAMES HOWARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 830 WOOD AVENUE

City BRIDGEPORT State CT Zip Code 06604-2136

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02908**

Amount of Each Receipt this Period  
 110.00

**C. MR. MELVIN HOWARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 5500 COLLINS AVENUE  
APARTMENT 404

City MIAMI BEACH State FL Zip Code 33140-5530

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02909**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	710.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1075 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS PALMER HOWARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 2160  
 City VAIL State CO Zip Code 81658-2160  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02910**  
 Amount of Each Receipt this Period  
 250.00

**B. MS. CHRISTINE T. HOWCROFT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 155 FIRE TOWER ROAD  
 City SOMERVILLE State TN Zip Code 38068-5407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02911**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. CHRISTINE T. HOWCROFT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 155 FIRE TOWER ROAD  
 City SOMERVILLE State TN Zip Code 38068-5407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02912**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 1076 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. ROBIN HOWE</b>		Date of Receipt 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI02913</b>
Mailing Address 1 HIGHLAND HILLS WAY		Amount of Each Receipt this Period 200.00
City LANDRUM	State SC	Zip Code 29356-3157
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. MR. ROBIN HOWE</b>		Date of Receipt 03 / 11 / 2014 <b>Transaction ID : 2014M04L11AI02914</b>
Mailing Address 1 HIGHLAND HILLS WAY		Amount of Each Receipt this Period 200.00
City LANDRUM	State SC	Zip Code 29356-3157
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. MR. BILLY H. HOWELL</b>		Date of Receipt 03 / 07 / 2014 <b>Transaction ID : 2014M04L11AI02915</b>
Mailing Address 8800 ANCHOR BAY DRIVE		Amount of Each Receipt this Period 235.00
City CLAY	State MI	Zip Code 48001-3512
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	635.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1077 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MORTON HOWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 ARROYO VISTA WAY  
 City PLACERVILLE State CA Zip Code 95667-6236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02916**  
 Amount of Each Receipt this Period  
 450.00

**B. MR. STEVE J. HOWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7302 REFLECTION ROAD COURT  
 City WICHITA State KS Zip Code 67205-1623  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PHYSICIAN Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI02917**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. ARTHUR WESTLEY HOWL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 420 HALSEY ROAD  
 City ANNAPOLIS State MD Zip Code 21401-3254  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NORTHRUP GRUMMAN Occupation SOFTWARE ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02918**  
 Amount of Each Receipt this Period  
 750.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1078 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT H. HOY JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1122 AIRWAY BOULEVARD  
 City EL PASO State TX Zip Code 79925-3619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02919**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. WILMA L. HOY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5300 W. 16TH AVENUE  
 UNIT 209  
 City HIALEAH State FL Zip Code 33012-2104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02920**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. JAMES J. HRUSKA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9021 S. 83RD COURT  
 City HICKORY HILLS State IL Zip Code 60457-1419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 901.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02921**  
 Amount of Each Receipt this Period  
 256.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 556.00  
**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 1079 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PATRICIA HARPST**  
Full Name (Last, First, Middle Initial)

Mailing Address 4949 E. CAMINO LA BRINCA

City TUCSON State AZ Zip Code 85718-4630

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02922**

Amount of Each Receipt this Period  
 300.00

**B. MR. DENNIS A. HUBER**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1301

City SEGUIN State TX Zip Code 78156-1301

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation FARMER

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  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02923**

Amount of Each Receipt this Period  
 300.00

**C. MS. JOAN M. HUBER**  
Full Name (Last, First, Middle Initial)

Mailing Address 24 ROLLING DRIVE

City GLEN HEAD State NY Zip Code 11545-2613

FEC ID number of contributing federal political committee. **C**

Name of Employer REFUSED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02924**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00

**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 1080 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SYLVAN HUBERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 9TH CIRCLE S.E.  
 City DEMOTTE State IN Zip Code 46310-8481  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI02925**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. SYLVAN HUBERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 9TH CIRCLE S.E.  
 City DEMOTTE State IN Zip Code 46310-8481  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02926**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. SYLVAN HUBERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 9TH CIRCLE S.E.  
 City DEMOTTE State IN Zip Code 46310-8481  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02927**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	220.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1081 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ELIZABETH S. HUCKABAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4104 RAMSEY ROAD  
 City Yukon State OK Zip Code 73099-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: HOMEMAKER Occupation: HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02928**  
 Amount of Each Receipt this Period: 100.00

**B. MRS. ELIZABETH S. HUCKABAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4104 RAMSEY ROAD  
 City Yukon State OK Zip Code 73099-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: HOMEMAKER Occupation: HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt: 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02929**  
 Amount of Each Receipt this Period: 101.00

**C. MRS. SUSAN S. HUCKABAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2531 LAKE RIDGE SHORES CIRCLE  
 City Reno State NV Zip Code 89519-5728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: RETIRED Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 651.00

Date of Receipt: 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI02930**  
 Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 251.00  
**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 1082 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SUSAN S. HUCKABAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2531 LAKE RIDGE SHORES CIRCLE  
 City RENO State NV Zip Code 89519-5728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 651.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02931**  
 Amount of Each Receipt this Period 1.00

**B. MR. DONALD W. HUDLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5403 GORHAM DRIVE  
 City CHARLOTTE State NC Zip Code 28226-6411  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02932**  
 Amount of Each Receipt this Period 275.00

**C. MR. DONALD W. HUDLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5403 GORHAM DRIVE  
 City CHARLOTTE State NC Zip Code 28226-6411  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 826.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02933**  
 Amount of Each Receipt this Period 276.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 552.00  
**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 1083 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GERRY HUDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3183 S GOLDEN STATE BLVD  
 City FRESNO State CA Zip Code 93725-2403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02934**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. J. RICHARD HUDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 332 MAGNOLIA AVENUE  
 City FREDERICK State MD Zip Code 21701-4817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LANDLORD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02935**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. J. RICHARD HUDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 332 MAGNOLIA AVENUE  
 City FREDERICK State MD Zip Code 21701-4817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LANDLORD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02936**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1084 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. J. RICHARD HUDSON**

Mailing Address 332 MAGNOLIA AVENUE

City State Zip Code  
FREDERICK MD 21701-4817

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED LANDLORD

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02937**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**B. DR. RONALD FREDERICK HUEY**

Mailing Address 520 FLORENCE COURT

City State Zip Code  
MILFORD MI 48381-1711

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02938**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. MR. KENNETH R. HUFF**

Mailing Address 3962 N. HACKBERRY WAY

City State Zip Code  
BOISE ID 83702-1662

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
341.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02939**

Amount of Each Receipt this Period  
1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1002.00

**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 1085 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LINDA HUFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9185 BETONY WOOD TRAIL  
 City JONESBORO State GA Zip Code 30236-5273  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **PIEDMONT SOUTH IMAGING** Occupation: **PHYSICIAN**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **201.00**

Date of Receipt: **03 / 26 / 2014**  
**Transaction ID : 2014M04L11AI02940**  
 Amount of Each Receipt this Period: **101.00**

**B. MR. CHARLES HUGEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2665 N. OCEAN BLVD.  
 City GULF STREAM State FL Zip Code 33483-7365  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **REQUESTED** Occupation: **REQUESTED**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt: **03 / 11 / 2014**  
**Transaction ID : 2014M04L11AI02941**  
 Amount of Each Receipt this Period: **1000.00**

**C. MR. CHARLES E. HUGEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 438  
 City MELVIN VILLAGE State NH Zip Code 03850-0438  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt: **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI02942**  
 Amount of Each Receipt this Period: **1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2101.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1086 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HAROLD L. HUGGINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 426 SUMMIT RIDGE PLACE  
 City NASHVILLE State TN Zip Code 37215-3835  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE TENNESSIAN Occupation WRITER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02943**  
 Amount of Each Receipt this Period  
 220.00

**B. MS. EVELYN HUGHES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29 KINSMAN DRIVE  
 City LACONIA State NH Zip Code 03246-2591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 822.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI02944**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. EVELYN HUGHES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29 KINSMAN DRIVE  
 City LACONIA State NH Zip Code 03246-2591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 822.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02945**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	420.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1087 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. EVELYN HUGHES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29 KINSMAN DRIVE  
 City LACONIA State NH Zip Code 03246-2591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 822.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02946**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. EVELYN HUGHES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29 KINSMAN DRIVE  
 City LACONIA State NH Zip Code 03246-2591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 822.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02947**  
 Amount of Each Receipt this Period  
 102.00

**C. MR. JOHN C. HUGHES JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4217 COLT DRIVE  
 City LAKE HAVASU CITY State AZ Zip Code 86404-2346  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HUGHES NORTHWEST Occupation C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02948**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	702.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1088 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JOHN C. HUGHES JR.**

Mailing Address 4217 COLT DRIVE

City State Zip Code  
LAKE HAVASU CITY AZ 86404-2346

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HUGHES NORTHWEST C.E.O.

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02949**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. MS. MARIA ENRIQUETA HUGHES**

Mailing Address 6021 FORDHAM STREET

City State Zip Code  
HOUSTON TX 77005-3125

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI02950**

Amount of Each Receipt this Period  
135.00

Full Name (Last, First, Middle Initial)  
**C. MS. MARIA ENRIQUETA HUGHES**

Mailing Address 6021 FORDHAM STREET

City State Zip Code  
HOUSTON TX 77005-3125

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI02951**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 755.00

**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 1089 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RALPH B. HUGHES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 114 EAST WOOD STREET  
 City NEW LENOX State IL Zip Code 60451-1459  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02952**  
 Amount of Each Receipt this Period 500.00

**B. MR. MICHAEL HUGHEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 RIVER ROAD APARTMENT 4E  
 City HANAHAN State SC Zip Code 29410-2042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02953**  
 Amount of Each Receipt this Period 110.00

**C. MRS. CAROLYN HULL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2585 BIRCH BAY LYNDEN RD  
 City CUSTER State WA Zip Code 98240-9717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI02954**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1110.00  
**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 1090 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. RICHARD HULTGREN</b>		Date of Receipt 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI02955</b>
Mailing Address 200 HOLLAND		Amount of Each Receipt this Period 91.00
City PRAIRIE VIEW	State KS	Zip Code 67664-9771
FEC ID number of contributing federal political committee. C		
Name of Employer KYLE RAILROAD	Occupation RAILROAD WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.00	

Full Name (Last, First, Middle Initial) <b>B. MR. DELMA HUME</b>		Date of Receipt 03 / 21 / 2014 <b>Transaction ID : 2014M04L11AI02956</b>
Mailing Address 5500 W. RACHAEL DRIVE		Amount of Each Receipt this Period 210.00
City PEORIA	State IL	Zip Code 61615-3057
FEC ID number of contributing federal political committee. C		
Name of Employer CATERPILLAR, INC.	Occupation SR. OPERATIONS CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. LOIS HUMPHREY</b>		Date of Receipt 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI02957</b>
Mailing Address 1512 LAWRENCE WAY		Amount of Each Receipt this Period 30.00
City ANDERSON	State IN	Zip Code 46013-5602
FEC ID number of contributing federal political committee. C		
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 801.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	331.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1091 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LOIS HUMPHREY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1512 LAWRENCE WAY  
 City ANDERSON State IN Zip Code 46013-5602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **801.00**

Date of Receipt: **03 / 12 / 2014**  
**Transaction ID : 2014M04L11AI02958**  
 Amount of Each Receipt this Period: **40.00**

**B. MRS. LOIS HUMPHREY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1512 LAWRENCE WAY  
 City ANDERSON State IN Zip Code 46013-5602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **801.00**

Date of Receipt: **03 / 12 / 2014**  
**Transaction ID : 2014M04L11AI02959**  
 Amount of Each Receipt this Period: **40.00**

**C. MRS. LOIS HUMPHREY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1512 LAWRENCE WAY  
 City ANDERSON State IN Zip Code 46013-5602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **801.00**

Date of Receipt: **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI02960**  
 Amount of Each Receipt this Period: **41.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **121.00**  
**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 1092 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEPHEN G. HUNDLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2396 57TH STREET N.  
 City SAINT PETERSBURG State FL Zip Code 33710-4233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02961**  
 Amount of Each Receipt this Period 100.00

**B. MRS. CLAUDETTE HUNNICUTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4758 RUNNING SPRINGS DRIVE  
 City FAYETTEVILLE State AR Zip Code 72764-8766  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02962**  
 Amount of Each Receipt this Period 120.00

**C. MRS. CLAUDETTE HUNNICUTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4758 RUNNING SPRINGS DRIVE  
 City FAYETTEVILLE State AR Zip Code 72764-8766  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI02963**  
 Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 370.00  
**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 1093 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. DEAN HUNT</b>		Date of Receipt
Mailing Address 6307 S. ROYAL POINT DRIVE		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
KINGWOOD	TX	77345-3328
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI02964</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. GEORGE F. HUNT JR.</b>		Date of Receipt
Mailing Address 16689 ACAPULCO ROAD		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
PUNTA GORDA	FL	33955-4502
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI02965</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="211.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="211.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MS. HOLLY HUNT</b>		Date of Receipt
Mailing Address 199 E LSD APT. #		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
CHICAGO	IL	60611
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI02966</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
HOLLY HUNT ENTERPRISES INC.	C.E.O.	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1011.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1094 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES DAVIS HUNT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1156 WOODBURN ROAD  
 City State Zip Code  
 SPARTANBURG SC 29302-3411  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED CHAIRMAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02967**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. SHIRLEY F. HUNT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 51 HEATHER DRIVE  
 City State Zip Code  
 CHARLESTON IL 61920-3845  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02968**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. WILLIAM R. HUNT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1408 N. LINCOLN STREET  
 City State Zip Code  
 ARLINGTON VA 22201-4916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 U.S. DEPARTMENT OF DEFENSE ANALYST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI02969**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**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 1095 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. MARGUERITE HUNTER</b>		Date of Receipt
Mailing Address 17 CHERRY LANE DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 13 / 2014
City	State	Zip Code
ENGLEWOOD	CO	80113-4209
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI02970
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		250.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	250.00	

Full Name (Last, First, Middle Initial) <b>B. DR. ROBERT HUNTER</b>		Date of Receipt
Mailing Address 2605 GREENBRIER COURT		M M M / D D D / Y Y Y Y Y Y 03 / 04 / 2014
City	State	Zip Code
BEAVERCREEK	OH	45431-8564
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI02971
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		5000.00
Name of Employer	Occupation	
PROVIDENCE MEDICAL GROUP	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	5000.00	

Full Name (Last, First, Middle Initial) <b>C. DR. JOHN B. HUNTINGTON</b>		Date of Receipt
Mailing Address 22505 EAST AVE N 22505 EAST AVE N		M M M / D D D / Y Y Y Y Y Y 03 / 12 / 2014
City	State	Zip Code
BATTLE CREEK	MI	49017-9427
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI02972
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		50.00
Name of Employer	Occupation	
N/A	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1096 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. JOHN B. HUNTINGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22505 EAST AVE N  
 22505 EAST AVE N  
 City BATTLE CREEK State MI Zip Code 49017-9427  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02973**  
 Amount of Each Receipt this Period  
 100.00

**B. ROSS P. HUOY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8708 N CR 650W  
 City ROYAL CENTER State IN Zip Code 46978-8929  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MILLERS HEALTH CARE Occupation MAINTENANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02974**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. CHARLES W. HURD JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3541 LOST CREEK BLVD.  
 City EL PASA State TX Zip Code 78735-1445  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER/ REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02975**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1097 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES W. HURD JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3541 LOST CREEK BLVD.  
 City EL PASA State TX Zip Code 78735-1445  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER/ REAL ESTATE  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **255.00**

Date of Receipt **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI02976**  
 Amount of Each Receipt this Period **50.00**

**B. MR. THOMAS O. HURD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 407 COVINGTON COURT  
 City NORTHVILLE State MI Zip Code 48168-1553  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HUPPERT ENGINEERING Occupation SALES ENGINEER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **201.00**

Date of Receipt **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI02977**  
 Amount of Each Receipt this Period **201.00**

**C. MS. JOAN M. HURLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5-4 TAMARON DRIVE  
 City WALDWICK State NJ Zip Code 07463-1148  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **306.00**

Date of Receipt **03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI02978**  
 Amount of Each Receipt this Period **51.00**

**SUBTOTAL** of Receipts This Page (optional)..... **302.00**  
**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 1098 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. CARL HUSS**

Mailing Address 2410 MEMORIAL DRIVE  
APARTMENT B319

City BRYAN State TX Zip Code 77802-2845

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02979**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**B. MR. HARRY P. HUTCHENS**

Mailing Address 568 TRIANON STREET

City HOUSTON State TX Zip Code 77024-4620

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02980**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MR. HARRY P. HUTCHENS**

Mailing Address 568 TRIANON STREET

City HOUSTON State TX Zip Code 77024-4620

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02981**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 101.00

**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 1099 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. HARRY P. HUTCHENS**

Mailing Address 568 TRIANON STREET

City State Zip Code  
HOUSTON TX 77024-4620

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI02982**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. DR. HAROLD C. HUTCHINSON JR.**

Mailing Address 629 PARK AVENUE E.

City State Zip Code  
PRINCETON IL 61356-2539

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02983**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. DR. HAROLD C. HUTCHINSON JR.**

Mailing Address 629 PARK AVENUE E.

City State Zip Code  
PRINCETON IL 61356-2539

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI02984**

Amount of Each Receipt this Period  
51.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 201.00

**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 1100 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RANDALL T. HUTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 7658  
 City SEMINOLE State FL Zip Code 33775-7658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TAMPA BAY PILOTS Occupation BOAT CAPTAIN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI02985**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. RANDALL T. HUTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 7658  
 City SEMINOLE State FL Zip Code 33775-7658  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TAMPA BAY PILOTS Occupation BOAT CAPTAIN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI02986**  
 Amount of Each Receipt this Period  
 16.00

**C. MR. ROBERT M. HUTTAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11645 CAMINITO CORRIENTE  
 City SAN DIEGO State CA Zip Code 92128-4541  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI02987**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 416.00  
**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 1101 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ROBERT M. HUTTAR**

Mailing Address 11645 CAMINITO CORRIENTE

City State Zip Code  
SAN DIEGO CA 92128-4541

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI02988**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. DANIEL HUTTO**

Mailing Address 6375 E. IRONWOOD DRIVE

City State Zip Code  
SCOTTSDALE AZ 85266-8761

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
COX COMMUNICATIONS EXECUTIVE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI02989**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**C. MR. JOHNNY H. HUTTO SR.**

Mailing Address 15356 SW FAIRCLOTH ROAD

City State Zip Code  
BLOUNTSTOWN FL 32424-4932

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI02990**

Amount of Each Receipt this Period  
101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 651.00

**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 1102 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID L. HUTTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 884 BITTERROOT STREET  
 City MOSCOW State ID Zip Code 83843-9545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SHULER'S FUNERAL CHAPEL Occupation MORTICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI02991**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. OLIN V. V. HYDE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 212 NOTTINGHAM ROAD  
 City RICHMOND State VA Zip Code 23221-3115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI02992**  
 Amount of Each Receipt this Period  
 100.00

**C. DR. BRUCE G. HYMON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1230 WOOD MILL TRAIL  
 City DAYTON State OH Zip Code 45459-3254  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KETTERING PHYSICIANS NETWORK Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI02993**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1220.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1103 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KEITH STEVEN HYNES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3331 CREEKVIEW DRIVE  
 City State Zip Code  
 BONITA SPRINGS FL 34134-2625  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI02994**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. ELDEN L. ICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 62 GOLF CLUB CROSSOVER  
 City State Zip Code  
 CROSSVILLE TN 38571-5727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI02995**  
 Amount of Each Receipt this Period  
 110.00

**C. MRS. STEVEN IGNASIAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27515 DURAND AVENUE  
 City State Zip Code  
 BURLINGTON WI 53105-9414  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI02996**  
 Amount of Each Receipt this Period  
 240.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1104 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. CHARLES ILIANAKALEA</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 07 / 2014 <b>Transaction ID : 2014M04L11AI02997</b>
Mailing Address 2825 WINDY HILL ROAD S.E. APARTMENT 5104		Amount of Each Receipt this Period 630.00
City MARIETTA State GA Zip Code 30067-6116	FEC ID number of contributing federal political committee. C	
Name of Employer RETIRED Occupation RETIRED	Aggregate Year-to-Date ▼ 1340.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. CHARLES ILIANAKALEA</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 19 / 2014 <b>Transaction ID : 2014M04L11AI02998</b>
Mailing Address 2825 WINDY HILL ROAD S.E. APARTMENT 5104		Amount of Each Receipt this Period 500.00
City MARIETTA State GA Zip Code 30067-6116	FEC ID number of contributing federal political committee. C	
Name of Employer RETIRED Occupation RETIRED	Aggregate Year-to-Date ▼ 1340.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. JOHN ILIBASSI</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI02999</b>
Mailing Address P.O. BOX 3545		Amount of Each Receipt this Period 500.00
City NEW HYDE PARK State NY Zip Code 11040-8545	FEC ID number of contributing federal political committee. C	
Name of Employer SELF-EMPLOYED Occupation REQUESTED	Aggregate Year-to-Date ▼ 1500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1630.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1105 OF 2949		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. WILLIAM HAROLD IMLER III</b>		Date of Receipt										
Mailing Address 1955 BELLS FERRY ROAD APARTMENT 3727		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		05		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03		05		2014								
City MARIETTA State GA Zip Code 30066-7011		<b>Transaction ID : 2014M04L11AI03000</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer UNI PRO FOOD SERVICE Occupation DIRECTOR OF E.D.A.		<table border="1"> <tr> <td>60.00</td> </tr> </table>	60.00									
60.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼										
		<table border="1"> <tr> <td>201.00</td> </tr> </table>	201.00									
201.00												

Full Name (Last, First, Middle Initial) <b>B. MR. WILLIAM HAROLD IMLER III</b>		Date of Receipt										
Mailing Address 1955 BELLS FERRY ROAD APARTMENT 3727		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>28</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		28		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03		28		2014								
City MARIETTA State GA Zip Code 30066-7011		<b>Transaction ID : 2014M04L11AI03001</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer UNI PRO FOOD SERVICE Occupation DIRECTOR OF E.D.A.		<table border="1"> <tr> <td>36.00</td> </tr> </table>	36.00									
36.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼										
		<table border="1"> <tr> <td>201.00</td> </tr> </table>	201.00									
201.00												

Full Name (Last, First, Middle Initial) <b>C. MR. WILLIAM HAROLD IMLER III</b>		Date of Receipt										
Mailing Address 1955 BELLS FERRY ROAD APARTMENT 3727		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>28</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		28		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03		28		2014								
City MARIETTA State GA Zip Code 30066-7011		<b>Transaction ID : 2014M04L11AI03002</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer UNI PRO FOOD SERVICE Occupation DIRECTOR OF E.D.A.		<table border="1"> <tr> <td>40.00</td> </tr> </table>	40.00									
40.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼										
		<table border="1"> <tr> <td>201.00</td> </tr> </table>	201.00									
201.00												

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>136.00</td> </tr> </table>	136.00
136.00		
<b>TOTAL</b> This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1106 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. RUTH KIMI INADOMI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5537 LORNA STREET  
 City TORRANCE State CA Zip Code 90503-4071  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03003**  
 Amount of Each Receipt this Period  
 201.00

**B. MR. RICHARD K. INGOLIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4909 HARING COURT  
 City METAIRIE State LA Zip Code 70006-1024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03004**  
 Amount of Each Receipt this Period  
 26.00

**C. MR. JOHN W. INWRIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2866 N. STAR ROAD  
 City COLUMBUS State OH Zip Code 43221-2959  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer QUALITY SUPPLY CHAIN COMPANY INC. Occupation PRESIDENT & C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03005**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 477.00  
**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 1107 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LOUIS A. IRETON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6105 GRAVES ROAD  
 City State Zip Code  
 CINCINNATI OH 45243-3826  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03006**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. JOHN H. IRETON-HEWITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 740 E WASHINGTON ST  
 APARTMENT 4  
 City State Zip Code  
 CHAMBERSBURG PA 17201-2750  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF APT RENTALS  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03007**  
 Amount of Each Receipt this Period  
 30.00

**C. ERIC IRWIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1314 MARQUETTE AVE  
 City State Zip Code  
 MINNEAPOLIS MN 55403-4111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NURSE MEMORIAL HELTHCARE PHARCMACIST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03008**  
 Amount of Each Receipt this Period  
 515.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 546.00  
**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 1108 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROGER B. IRWIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 233 AVON DRIVE  
 City CARLISLE State PA Zip Code 17013-4451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03009**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. DUANE LEROY ISCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4429 HARBOURGATE DRIVE  
 City RALEIGH State NC Zip Code 27612-2719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03010**  
 Amount of Each Receipt this Period  
 75.00

**C. MR. DUANE LEROY ISCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4429 HARBOURGATE DRIVE  
 City RALEIGH State NC Zip Code 27612-2719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03011**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	177.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1109 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. REBECCA P. IVANS**  
Full Name (Last, First, Middle Initial)

Mailing Address 807 LAJOLLA RANCHO ROAD

City LAJOLLA	State CA	Zip Code 92037-7409
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03012**

Amount of Each Receipt this Period  
 110.00

**B. MRS. REBECCA P. IVANS**  
Full Name (Last, First, Middle Initial)

Mailing Address 807 LAJOLLA RANCHO ROAD

City LAJOLLA	State CA	Zip Code 92037-7409
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03013**

Amount of Each Receipt this Period  
 80.00

**C. MR. JOHN F. IVESTER JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 14805 RAMAH CHURCH ROAD

City HUNTERSVILLE	State NC	Zip Code 28078-4012
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation PRESIDENT
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03014**

Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	390.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1110 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JOANNE D. IVEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14501 ALAMEDA AVENUE  
 City CLINT State TX Zip Code 79836-6112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03015**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. COLETTA IVY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2847 CASTLE WOODS LANE  
 City DUBUQUE State IA Zip Code 52001-7515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03016**  
 Amount of Each Receipt this Period  
 300.00

**C. MS. ELIZABETH ANN JACKSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 724 CLAYTON CORNERS DRIVE  
 City BALLWIN State MO Zip Code 63011-2839  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03018**  
 Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 910.00  
**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 1111 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ELIZABETH ANN JACKSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 724 CLAYTON CORNERS DRIVE

City	State	Zip Code
BALLWIN	MO	63011-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **530.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 11 / 2014**  
**Transaction ID : 2014M04L11AI03019**

Amount of Each Receipt this Period  
**100.00**

**B. MS. EVELYN L. JACKSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 27 RIVERBEND DRIVE

City	State	Zip Code
SHELBY	OH	44875-1766

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI03020**

Amount of Each Receipt this Period  
**200.00**

**C. MR. FRANK JACKSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 40 N. IH-35, TH-8

City	State	Zip Code
AUSTIN	TX	78701-4318

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
TAAHP	EXECUTIVE DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI03021**

Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>550.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1112 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. H. E. JACKSON JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5106 ANNESWAY DRIVE  
 City NASHVILLE State TN Zip Code 37205-2711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JACKSON GROUP INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03022**  
 Amount of Each Receipt this Period 301.00

**B. MRS. LAURA B. JACKSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6515 DARE CIRCLE  
 City COLUMBIA State SC Zip Code 29206-1152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ENGINEER Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03023**  
 Amount of Each Receipt this Period 50.00

**C. MR. R. WAYNE JACKSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 CHURCHILL DRIVE  
 City ATLANTA State GA Zip Code 30350-4503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PRICEWATERHOUSE COOPERS Occupation C.P.A.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03024**  
 Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1351.00  
**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 1113 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SHEILA D. JACKSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 OAKWOOD DRIVE

City GREENVILLE State SC Zip Code 29609-3258

FEC ID number of contributing federal political committee. **C**

Name of Employer HEARTLAND HEALTH & REHAB Occupation NURSE

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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03025**

Amount of Each Receipt this Period  
 315.00

**B. MR. WILLIAM JACKSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 721 KAHOA DRIVE

City KAILUA State HI Zip Code 96734-2439

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 506.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03026**

Amount of Each Receipt this Period  
 50.00

**C. MR. WILLIAM JACKSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 721 KAHOA DRIVE

City KAILUA State HI Zip Code 96734-2439

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 506.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI03027**

Amount of Each Receipt this Period  
 136.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 501.00

**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 1114 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LUKE RALPH JACOBELLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17201 GRESHAM STREET  
 City NORTHRIDGE State CA Zip Code 91325-3207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JOHN PAUL MITCHELL SYSTEMS Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03028**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. ROBERT JACOBS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 116 PIERCE BLVD.  
 City WINDSOR State CT Zip Code 06095-1711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03029**  
 Amount of Each Receipt this Period  
 240.00

**C. MS. CHARLENE JACOBSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3353 MARNIE AVENUE  
 City WATERLOO State IA Zip Code 50701-4301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03030**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 740.00  
**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 1115 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. NORMAN G. JACOBSON JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 900 UNIVERSITY STREET  
APARTMENT 1002

City SEATTLE State WA Zip Code 98101-3722

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 371.00

Date of Receipt  
03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03031**

Amount of Each Receipt this Period  
126.00

**B. MR. ARTHUR L. JACOBY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2609 CHIMNEY ROCK ROAD

City HUNTSVILLE State TX Zip Code 77320-3704

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03032**

Amount of Each Receipt this Period  
135.00

**C. MR. ARTHUR L. JACOBY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2609 CHIMNEY ROCK ROAD

City HUNTSVILLE State TX Zip Code 77320-3704

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03033**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 311.00

**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 1116 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. NEIL H. JACOBY JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1434 MIDVALE AVENUE  
 City State Zip Code  
 LOS ANGELES CA 90024-5406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED MANAGER & SCIENTIST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03034**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. NEIL H. JACOBY JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1434 MIDVALE AVENUE  
 City State Zip Code  
 LOS ANGELES CA 90024-5406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED MANAGER & SCIENTIST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03035**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. NEIL H. JACOBY JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1434 MIDVALE AVENUE  
 City State Zip Code  
 LOS ANGELES CA 90024-5406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED MANAGER & SCIENTIST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03036**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 1117 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT JACOBY**  
Full Name (Last, First, Middle Initial)

Mailing Address 8 SPRINGHOUSE ROAD

City SLOATSBURG State NY Zip Code 10974-2646

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2940.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03037**

Amount of Each Receipt this Period  
 1000.00

**B. MR. JIM JACUMIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3690 MILLER BRIDGE ROAD

City CONNELLY SPRINGS State NC Zip Code 28612-7347

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03038**

Amount of Each Receipt this Period  
 202.00

**C. MR. DURK I. JAGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 69 OTTER ISLAND

City JOHNS ISLAND State SC Zip Code 29455-5927

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 376.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03039**

Amount of Each Receipt this Period  
 126.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1328.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1118 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LOREN JAHN**  
Full Name (Last, First, Middle Initial)

Mailing Address 13149 N. COUNTRY CLUB COURT

City PALOS HEIGHTS	State IL	Zip Code 60463-2727
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03040**

Amount of Each Receipt this Period  
 150.00

**B. MR. CLIFFORD D. JAMES III**  
Full Name (Last, First, Middle Initial)

Mailing Address 102 DANBURY LANE

City OAK RIDGE	State TN	Zip Code 37830-7600
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FEC ID number of contributing federal political committee. **C**

Name of Employer PEDIATRICIAN	Occupation PEDIATRICIAN
----------------------------------	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03041**

Amount of Each Receipt this Period  
 221.00

**C. MRS. EDDIE JAMES**  
Full Name (Last, First, Middle Initial)

Mailing Address 303 SUMMER HILL DRIVE

City FREDERICKSBURG	State TX	Zip Code 78624-5443
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03042**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	421.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1119 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BARBARA JAMESON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 749

City EOLA	State TX	Zip Code 76937-0749
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03043**

Amount of Each Receipt this Period  
 100.00

**B. MRS. BARBARA JAMESON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 749

City EOLA	State TX	Zip Code 76937-0749
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03044**

Amount of Each Receipt this Period  
 2.00

**C. MS. ROSE ANN JANKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 242

City WINSIDE	State NE	Zip Code 68790-0242
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03045**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	152.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1120 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ROSE ANN JANKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 242  
 City WINSIDE State NE Zip Code 68790-0242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03046**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. THOMAS J. JANKOVICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24 OUTRIDER ROAD  
 City ROLLING HILLS State CA Zip Code 90274-5232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JANKOVICH COMPANY Occupation OWNER/PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03047**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. LOWELL D. JANZEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1025  
 City ROCKPORT State TX Zip Code 78381-1025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03048**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1300.00  
**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 1121 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD C. JANZOW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1500 SHERIDAN ROAD  
 UNIT 8F  
 City WILMETTE State IL Zip Code 60091-1845  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03049**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. RICHARD C. JANZOW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1500 SHERIDAN ROAD  
 UNIT 8F  
 City WILMETTE State IL Zip Code 60091-1845  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03050**  
 Amount of Each Receipt this Period  
 1.00

**C. MS. LOURDES CAROLINA JARDINES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9311 S.W. 4TH STREET  
 APARTMENT 221  
 City MIAMI State FL Zip Code 33174-2274  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 326.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03051**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 146.00  
**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 1122 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. LOURDES CAROLINA JARDINES**

Mailing Address 9311 S.W. 4TH STREET  
APARTMENT 221

City MIAMI State FL Zip Code 33174-2274

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **326.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 14 / 2014**  
**Transaction ID : 2014M04L11AI03052**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. MS. LOURDES CAROLINA JARDINES**

Mailing Address 9311 S.W. 4TH STREET  
APARTMENT 221

City MIAMI State FL Zip Code 33174-2274

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **326.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2014**  
**Transaction ID : 2014M04L11AI03053**

Amount of Each Receipt this Period  
**15.00**

Full Name (Last, First, Middle Initial)  
**C. MS. LOURDES CAROLINA JARDINES**

Mailing Address 9311 S.W. 4TH STREET  
APARTMENT 221

City MIAMI State FL Zip Code 33174-2274

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **326.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 26 / 2014**  
**Transaction ID : 2014M04L11AI03054**

Amount of Each Receipt this Period  
**16.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>131.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1123 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. LOURDES CAROLINA JARDINES</b>		Date of Receipt
Mailing Address 9311 S.W. 4TH STREET APARTMENT 221		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City MIAMI	State FL	Zip Code 33174-2274
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI03055</b>
Name of Employer RETIRED		Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="326.00"/>	
		Amount of Each Receipt this Period <input type="text" value="15.00"/>

Full Name (Last, First, Middle Initial) <b>B. MR. JERRY JARRELL</b>		Date of Receipt
Mailing Address 10 KINGS HILL LANE		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City HUMBLE	State TX	Zip Code 77346-4041
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI03056</b>
Name of Employer SELF-EMPLOYED		Occupation ACCOUNTANT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="436.00"/>	
		Amount of Each Receipt this Period <input type="text" value="120.00"/>

Full Name (Last, First, Middle Initial) <b>C. MR. JERRY JARRELL</b>		Date of Receipt
Mailing Address 10 KINGS HILL LANE		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City HUMBLE	State TX	Zip Code 77346-4041
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI03057</b>
Name of Employer SELF-EMPLOYED		Occupation ACCOUNTANT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="436.00"/>	
		Amount of Each Receipt this Period <input type="text" value="1.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="136.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1124 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BARBARA A. JARVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13923 DUNCANNON DRIVE  
 City HOUSTON State TX Zip Code 77015-2413  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03058**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. BARBARA A. JARVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13923 DUNCANNON DRIVE  
 City HOUSTON State TX Zip Code 77015-2413  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03059**  
 Amount of Each Receipt this Period  
 90.00

**C. MRS. BARBARA A. JARVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13923 DUNCANNON DRIVE  
 City HOUSTON State TX Zip Code 77015-2413  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03060**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 191.00  
**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 1125 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. GARY M. JASON**

Mailing Address **875 AVENIDA ACAPULCO**

City **SAN CLEMENTE** State **CA** Zip Code **92672-2406**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ARGONETICS, INC.** Occupation **SALESMAN**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
**03 / 11 / 2014**  
**Transaction ID : 2014M04L11AI03061**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**B. MR. GARY M. JASON**

Mailing Address **875 AVENIDA ACAPULCO**

City **SAN CLEMENTE** State **CA** Zip Code **92672-2406**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ARGONETICS, INC.** Occupation **SALESMAN**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
**03 / 18 / 2014**  
**Transaction ID : 2014M04L11AI03062**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. MR. GARY M. JASON**

Mailing Address **875 AVENIDA ACAPULCO**

City **SAN CLEMENTE** State **CA** Zip Code **92672-2406**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ARGONETICS, INC.** Occupation **SALESMAN**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
**03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI03063**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **150.00**

**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 1126 OF 2949
	<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
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. RICHARD B. JATCZAK</b>		Date of Receipt
Mailing Address 5225 ROBERTS DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 18 / 2014
City	State	Zip Code
GREENDALE	WI	53129-2819
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03064</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		86.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	210.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. EUGENIA JEARY</b>		Date of Receipt
Mailing Address 1874 280TH		M M M / D D D / Y Y Y Y Y Y 03 / 03 / 2014
City	State	Zip Code
SEWARD	NE	68434-7852
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03065</b>
Name of Employer SELF-EMPLOYED		Amount of Each Receipt this Period
Occupation FARMER		35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	251.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. EUGENIA JEARY</b>		Date of Receipt
Mailing Address 1874 280TH		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City	State	Zip Code
SEWARD	NE	68434-7852
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03066</b>
Name of Employer SELF-EMPLOYED		Amount of Each Receipt this Period
Occupation FARMER		1.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	251.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	86.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1127 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEPHEN B. JEFFRIES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12 BRIMMER STREET  
 City BOSTON State MA Zip Code 02108-1002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer S. B. JEFFRIES CONSULTANTS Occupation PRIVATE INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03067**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. JAMES JEMISON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1350 DEERFOOT ROAD  
 City DELAND State FL Zip Code 32720-4459  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 512.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03068**  
 Amount of Each Receipt this Period  
 102.00

**C. MR. RICHARD E. JENKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2540 BRAEWOOD LANE  
 City EUGENE State OR Zip Code 97405-1894  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03069**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1152.00  
**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 1128 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. CAROL JENNINGS</b>		Date of Receipt
Mailing Address 17434 W. LAKEWAY AVENUE		M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2014
City	State	Zip Code
BATON ROUGE	LA	70810-7927
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03070</b>
Name of Employer HOMEMAKER		Amount of Each Receipt this Period
Occupation HOMEMAKER		500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	1250.00	

Full Name (Last, First, Middle Initial) <b>B. MR. JOHNNIE JENNINGS</b>		Date of Receipt
Mailing Address 5117 W. BAY ROAD		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2014
City	State	Zip Code
BAYTOWN	TX	77523-9734
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03071</b>
Name of Employer SELF-EMPLOYED		Amount of Each Receipt this Period
Occupation RANCHER		100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	250.00	

Full Name (Last, First, Middle Initial) <b>C. MR. JOHNNIE JENNINGS</b>		Date of Receipt
Mailing Address 5117 W. BAY ROAD		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014
City	State	Zip Code
BAYTOWN	TX	77523-9734
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03072</b>
Name of Employer SELF-EMPLOYED		Amount of Each Receipt this Period
Occupation RANCHER		150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1129 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRUCE C. JENSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 132 W. 2ND STREET  
 City FLORENCE State CO Zip Code 81226-1402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03073**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. JON D. JENSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 515 JASMINE CIRCLE  
 City UPPER GWYNEDD State PA Zip Code 19446-5694  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03074**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. JON D. JENSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 515 JASMINE CIRCLE  
 City UPPER GWYNEDD State PA Zip Code 19446-5694  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 635.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03075**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 290.00  
**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 1130 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JON D. JENSEN**

Mailing Address 515 JASMINE CIRCLE

City State Zip Code  
UPPER GWYNEDD PA 19446-5694

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
635.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03076**

Amount of Each Receipt this Period  
 25.00

Full Name (Last, First, Middle Initial)  
**B. MR. JON D. JENSEN**

Mailing Address 515 JASMINE CIRCLE

City State Zip Code  
UPPER GWYNEDD PA 19446-5694

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
635.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03077**

Amount of Each Receipt this Period  
 120.00

Full Name (Last, First, Middle Initial)  
**C. MR. JON D. JENSEN**

Mailing Address 515 JASMINE CIRCLE

City State Zip Code  
UPPER GWYNEDD PA 19446-5694

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
635.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI03078**

Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 175.00

**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 1131 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JON D. JENSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 515 JASMINE CIRCLE  
 City State Zip Code  
 UPPER GWYNEDD PA 19446-5694  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 635.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03079**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. JON D. JENSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 515 JASMINE CIRCLE  
 City State Zip Code  
 UPPER GWYNEDD PA 19446-5694  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 635.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03080**  
 Amount of Each Receipt this Period  
 240.00

**C. MS. MARGUERITE J. JENSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 74  
 City State Zip Code  
 WAYNE IL 60184-0074  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03081**  
 Amount of Each Receipt this Period  
 201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 491.00  
**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 1132 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CAROLYN JERDE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1835 VINE HILL ROAD

City SANTA CRUZ State CA Zip Code 95065-9703

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03082**

Amount of Each Receipt this Period  
 400.00

**B. MR. ALFRED JERNIGAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 109 W LEGACY DR

City BRANDON State MS Zip Code 39042-5519

FEC ID number of contributing federal political committee. **C**

Name of Employer RANKIN COUNTY, MISSISSIPPI Occupation ASSISTANT DISTRICT ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03083**

Amount of Each Receipt this Period  
 215.00

**C. MR. DEAN J. JESSOP**  
Full Name (Last, First, Middle Initial)

Mailing Address 8620 N. NEW BRAUNFELS AVENUE  
SUITE 410

City SAN ANTONIO State TX Zip Code 78217-6362

FEC ID number of contributing federal political committee. **C**

Name of Employer E. TEL Occupation MANUFACTURING REPRESENTATIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03084**

Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 725.00

**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 1133 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DALE JESSUP**

Mailing Address P.O. BOX 188

City LYONS                      State IN                      Zip Code 47443-0188

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED                      Occupation FARMER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
601.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03085**

Amount of Each Receipt this Period  
101.00

Full Name (Last, First, Middle Initial)  
**B. MR. KENNETH A. JIMERSON**

Mailing Address 312 DECATUR ROAD

City DUNNVILLE                      State KY                      Zip Code 42528-9702

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED                      Occupation REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03086**

Amount of Each Receipt this Period  
220.00

Full Name (Last, First, Middle Initial)  
**C. MR. JAMES JIRAL**

Mailing Address 1617 WOODSTOCK COURT

City CHESAPEAKE                      State VA                      Zip Code 23320-0609

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED                      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03087**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1321.00

**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 1134 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. DONALD E. JOCELYN</b>		Date of Receipt
Mailing Address 139 N. BELMONT STREET APARTMENT O.		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City GLENDALE	State CA	Zip Code 91206-4910
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI03088</b>
Name of Employer RALPHS GROCERY COMPANY		Amount of Each Receipt this Period
Occupation DEPARTMENT HEAD		<input type="text" value="30.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="295.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. DONALD E. JOCELYN</b>		Date of Receipt
Mailing Address 139 N. BELMONT STREET APARTMENT O.		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City GLENDALE	State CA	Zip Code 91206-4910
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI03089</b>
Name of Employer RALPHS GROCERY COMPANY		Amount of Each Receipt this Period
Occupation DEPARTMENT HEAD		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="295.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. DONALD E. JOCELYN</b>		Date of Receipt
Mailing Address 139 N. BELMONT STREET APARTMENT O.		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City GLENDALE	State CA	Zip Code 91206-4910
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI03090</b>
Name of Employer RALPHS GROCERY COMPANY		Amount of Each Receipt this Period
Occupation DEPARTMENT HEAD		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="295.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="80.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1135 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JONATHAN JODKA**

Mailing Address 198 CHARTER OAK DRIVE

City State Zip Code  
NEW CANAAN CT 06840-6703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MARVICK CAPITAL LIMITED INVESTMENTS MANAGEMENT SALES

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03091**

Amount of Each Receipt this Period  
275.00

Full Name (Last, First, Middle Initial)  
**B. DENISE JOHN**

Mailing Address 1205 WILLIAMSBURG WAY

City State Zip Code  
CHARLESTON WV 25314-1937

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03092**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MR. FOX JOHN**

Mailing Address 1239 1ST STREET

City State Zip Code  
NEW ORLEANS LA 70130-5708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03093**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 875.00

**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 1136 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEVEN JOHNS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9558 GREENWOOD AVENUE N.  
 APARTMENT 101  
 City SEATTLE State WA Zip Code 98103-3036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SEATTLE TENNIS CLUB Occupation LINE COOK  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03094**  
 Amount of Each Receipt this Period  
 65.00

**B. MR. STEVEN JOHNS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9558 GREENWOOD AVENUE N.  
 APARTMENT 101  
 City SEATTLE State WA Zip Code 98103-3036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SEATTLE TENNIS CLUB Occupation LINE COOK  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03095**  
 Amount of Each Receipt this Period  
 25.00

**C. DR. GREGORY JOHNSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11725 S. SANDUSKY AVENUE  
 City TULSA State OK Zip Code 74137-1854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer OKLAHOMA HEART INSTITUTE Occupation PHYSICIAN/CARDIOLOGIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03096**  
 Amount of Each Receipt this Period  
 125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 215.00  
**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 1137 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALAN D. JOHNSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 670 POPES VALLEY DRIVE

City	State	Zip Code
COLORADO SPRINGS	CO	80919-7947

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03097**

Amount of Each Receipt this Period  
 126.00

**B. MR. AUBREY K. JOHNSON**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 5047

City	State	Zip Code
SUN CITY WEST	AZ	85376-5047

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03098**

Amount of Each Receipt this Period  
 65.00

**C. MR. BARRY F. JOHNSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 8827 ARBORSIDE DRIVE

City	State	Zip Code
DALLAS	TX	75243-7201

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF-EMPLOYED	INSURANCE SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03099**

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	691.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1138 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. BETH JOHNSON**

Mailing Address P.O. BOX 244

City State Zip Code  
ZEBULON NC 27597-0244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03100**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. CHARLES H. JOHNSON JR.**

Mailing Address 883 LINNAEN TERRACE N.W.

City State Zip Code  
PORT CHARLOTTE FL 33948-3616

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03101**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MR. CHARLES M. JOHNSON**

Mailing Address 300 DOW STREET N. #228  
ANGELS CARE CENTER

City State Zip Code  
CANNON FALLS MN 55009-1810

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
865.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03102**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

**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 1139 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. CHARLES M. JOHNSON</b>		Date of Receipt
Mailing Address 300 DOW STREET N. #228 ANGELS CARE CENTER		M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2014
City CANNON FALLS	State MN	Zip Code 55009-1810
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 2014M04L11AI03103</b>
Name of Employer RETIRED		Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 400.00
		865.00

Full Name (Last, First, Middle Initial) <b>B. MR. DALE JOHNSON</b>		Date of Receipt
Mailing Address 3 BIRCHWOOD ROAD		M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2014
City MAHTOMEDI	State MN	Zip Code 55115-1824
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 2014M04L11AI03104</b>
Name of Employer RETIRED		Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 235.00
		470.00

Full Name (Last, First, Middle Initial) <b>C. DR. DAVID E. JOHNSON</b>		Date of Receipt
Mailing Address P.O. BOX 6852		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014
City KETCHIKAN	State AK	Zip Code 99901-1852
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 2014M04L11AI03105</b>
Name of Employer PEACE HEALTH MEDICAL GROUP		Occupation PHYSICIAN
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 110.00
		210.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	745.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1140 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DEAN E. JOHNSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 675 PEARSON STREET  
 APARTMENT 813  
 City DES PLAINES State IL Zip Code 60016-4619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03106**  
 Amount of Each Receipt this Period 101.00

**B. MS. ELIZABETH M. JOHNSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18641 N. CONESTOGA DRIVE  
 City SUN CITY State AZ Zip Code 85373-1429  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 401.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03107**  
 Amount of Each Receipt this Period 1.00

**C. MR. FLOYD W. JOHNSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 120 FIELDS ROW  
 City PAULS VALLEY State OK Zip Code 73075-9600  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER/RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03108**  
 Amount of Each Receipt this Period 115.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 217.00  
**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 1141 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. GEORGE E. JOHNSON**

Mailing Address 1010 AMERICAN EAGLE BLVD. #110

City State Zip Code  
SUN CITY CENTER FL 33573-5268

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03109**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. GERALD DALE JOHNSON**

Mailing Address 2538 E. BRECKENRIDGE DRIVE

City State Zip Code  
BYRON IL 61010-9185

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
BLOUNT INTERNATIONAL, INC. PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
395.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03110**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**C. MRS. GERALDINE FRANCES JOHNSON**

Mailing Address 1074 TIMBER CREEK DRIVE  
UNIT 1

City State Zip Code  
CARMEL IN 46032-7522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
296.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03111**

Amount of Each Receipt this Period  
251.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 471.00

**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 1142 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. GREGORY PAUL JOHNSON**

Mailing Address 5026 TRENTON STREET

City State Zip Code  
TAMPA FL 33619-6832

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PRECISE CONSTRUCTION, INC. GENERAL CONTRACTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03112**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. MR. HARVEY A. JOHNSON**

Mailing Address 111 LAKESIDE DRIVE

City State Zip Code  
EDENTON NC 27932-2063

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03113**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**C. MR. JOHN WILLIAM JOHNSON**

Mailing Address P.O. BOX 893

City State Zip Code  
GEORGE WEST TX 78022-0893

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
GASTAL VALUE & EQUIPMENT PRESIDENT/OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03114**

Amount of Each Receipt this Period  
750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1450.00

**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 1143 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN WILLIAM JOHNSON**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 893

City State Zip Code  
GEORGE WEST TX 78022-0893

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
GASTAL VALUE & EQUIPMENT PRESIDENT/OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1350.00

Date of Receipt  
03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03115**

Amount of Each Receipt this Period  
50.00

**B. MR. JOHN WILLIAM JOHNSON**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 893

City State Zip Code  
GEORGE WEST TX 78022-0893

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
GASTAL VALUE & EQUIPMENT PRESIDENT/OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1350.00

Date of Receipt  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03116**

Amount of Each Receipt this Period  
550.00

**C. MRS. MARGARET E. JOHNSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 52 MISSIONARY ROAD  
APARTMENT 5203

City State Zip Code  
CROMWELL CT 06416-2170

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03117**

Amount of Each Receipt this Period  
60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 660.00

**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 1144 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. MARGARET E. JOHNSON</b>		Date of Receipt
Mailing Address 52 MISSIONARY ROAD APARTMENT 5203		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
CROMWELL	CT	06416-2170
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI03118</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="35.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="301.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. MERVIN JOHNSON</b>		Date of Receipt
Mailing Address 1204 COLONY PLAZA		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
NEWPORT BEACH	CA	92660-6359
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI03119</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="401.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="801.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MRS. PATRICIA M JOHNSON</b>		Date of Receipt
Mailing Address 35 CATSPA W CAPE		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
CORONADO	CA	92118-3221
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI03120</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	CONSTRUCTION/REAL ESTATE	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="225.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="536.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 1145 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. RICHARD E. JOHNSON</b>		Date of Receipt 03 / 19 / 2014 <b>Transaction ID : 2014M04L11AI03121</b>
Mailing Address 6226 IVANHOE COURT		Amount of Each Receipt this Period 250.00
City BARTLETT	State TN	Zip Code 38134-5922
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. MR. ROB A. JOHNSON</b>		Date of Receipt 03 / 20 / 2014 <b>Transaction ID : 2014M04L11AI03122</b>
Mailing Address 7936 TIGER LILY DRIVE		Amount of Each Receipt this Period 250.00
City NAPLES	State FL	Zip Code 34113-2633
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation FINANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. MR. ROBERT P. JOHNSON</b>		Date of Receipt 03 / 28 / 2014 <b>Transaction ID : 2014M04L11AI03123</b>
Mailing Address P.O. BOX 5006		Amount of Each Receipt this Period 221.00
City BISMARCK	State ND	Zip Code 58502-5006
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation GEOLOGIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	721.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1146 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SARA JOHNSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 44831 117TH STREET

City State Zip Code  
SISSETON SD 57262-6200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
C.D.P. HOSPITAL AND CLINIC REGISTERED NURSE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03124**

Amount of Each Receipt this Period  
220.00

**B. MR. STEVEN HOLLAND JOHNSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 8802 KING DRIVE  
8802 KING DRIVE

City State Zip Code  
DISPUTANTA VA 23842-8024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HARRIS IT SERVICES NETWORK SECURITY MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 362.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03125**

Amount of Each Receipt this Period  
34.00

**C. MS. BARBARA D. JOHNSTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 6833 N. OCEAN BLVD  
#5

City State Zip Code  
OCEAN RIDGE FL 33435-3345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03126**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 354.00

**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 1147 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. BARBARA D. JOHNSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6833 N. OCEAN BLVD #5  
 City OCEAN RIDGE State FL Zip Code 33435-3345  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI03127**  
 Amount of Each Receipt this Period: **201.00**

**B. MR. RAY L. JOHNSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 34500 HEDGEAPPLE ROAD  
 City SCIO State OH Zip Code 43988-9731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **251.00**

Date of Receipt: **03 / 21 / 2014**  
**Transaction ID : 2014M04L11AI03128**  
 Amount of Each Receipt this Period: **101.00**

**C. MR. RICHARD M. JOHNSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4214 SUNSET BEACH ROAD WEST  
 City TACOMA State WA Zip Code 98466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **SELF-EMPLOYED** Occupation: **CONTRACTOR**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **220.00**

Date of Receipt: **03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI03129**  
 Amount of Each Receipt this Period: **120.00**

**SUBTOTAL** of Receipts This Page (optional)..... **422.00**  
**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 1148 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. VERNA LEE JOHNSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1003 EAST 1300 SOUTH  
 City State Zip Code  
 SALT LAKE CITY UT 84105-1858  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03130**  
 Amount of Each Receipt this Period  
 220.00

**B. MR. GLENN F. JONAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1903 GRANVILLE ROAD  
 City State Zip Code  
 CEDARBURG WI 53012-9739  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 R. F. TECHNOLOGIES C.E.O.  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 6100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03131**  
 Amount of Each Receipt this Period  
 5000.00

**C. MS. BARBARA JONES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 124 WOOD OAK DRIVE  
 City State Zip Code  
 JOSHUA TX 76058-4708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03132**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5320.00  
**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 1149 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. DR. DUDLEY D. JONES</b>		Date of Receipt 03 / 28 / 2014 <b>Transaction ID : 2014M04L11AI03133</b>
Mailing Address 300 N. CREEKWOOD DRIVE		Amount of Each Receipt this Period 250.00
City MANSFIELD	State TX	Zip Code 76063-5428
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer QUEST DIAGNOSTICS, INC.	Occupation PATHOLOGIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. MR. EARL JONES</b>		Date of Receipt 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI03134</b>
Mailing Address 364 COUNTY ROAD 402		Amount of Each Receipt this Period 120.00
City PROCTORVILLE	State OH	Zip Code 45669-8116
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

Full Name (Last, First, Middle Initial) <b>C. MR. FAUNDSWORTH B. JONES</b>		Date of Receipt 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI03135</b>
Mailing Address 2021 VIRGINIA ROAD		Amount of Each Receipt this Period 201.00
City LOS ANGELES	State CA	Zip Code 90016-1731
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 201.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	571.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1150 OF 2949  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. FRANK JONES**

Mailing Address 5215 19TH STREET

City LUBBOCK State TX Zip Code 79407-2101

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation RANCHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03136**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. GILBERT A. JONES**

Mailing Address 8 MARINA DRIVE

City BELLINGHAM State WA Zip Code 98229-7926

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03137**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**C. MR. GILBERT A. JONES**

Mailing Address 8 MARINA DRIVE

City BELLINGHAM State WA Zip Code 98229-7926

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03138**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 470.00

**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 1151 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. GRETA JONES**  
Full Name (Last, First, Middle Initial)

Mailing Address 169 STAUFFER DRIVE

City WADSWORTH State OH Zip Code 44281-9456

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 476.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03139**

Amount of Each Receipt this Period  
50.00

**B. MRS. GRETA JONES**  
Full Name (Last, First, Middle Initial)

Mailing Address 169 STAUFFER DRIVE

City WADSWORTH State OH Zip Code 44281-9456

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 476.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03140**

Amount of Each Receipt this Period  
100.00

**C. MRS. GRETA JONES**  
Full Name (Last, First, Middle Initial)

Mailing Address 169 STAUFFER DRIVE

City WADSWORTH State OH Zip Code 44281-9456

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 476.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 20 / 2014  
**Transaction ID : 2014M04L11AI03141**

Amount of Each Receipt this Period  
131.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 281.00

**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 1152 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JERRY JONES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 821 EDEN COURT  
 City ALEXANDRIA State VA Zip Code 22308-2034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03142**  
 Amount of Each Receipt this Period  
 5000.00

**B. JESSE JONES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15 E. MAGNOLIA AVENUE  
 City PORT ORANGE State FL Zip Code 32127-6403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation COMMERCIAL CONSTRUCTION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03143**  
 Amount of Each Receipt this Period  
 360.00

**C. MR. JIMMY W. JONES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3709 ARDEN ROAD  
 City AMARILLO State TX Zip Code 79118-9103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer J.J. ELECTRIC AGENT INC. Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03144**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5610.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1153 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LINDA L. JONES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 FLEMING AVENUE  
 City FAIRMONT State WV Zip Code 26554-2342  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03145**  
 Amount of Each Receipt this Period  
 221.00

**B. MR. LOUIS E. JONES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1238 HOMEWOOD LANE  
 City LA CANADA FLINTRIDGE State CA Zip Code 91011-3152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03146**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. LOUIS E. JONES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1238 HOMEWOOD LANE  
 City LA CANADA FLINTRIDGE State CA Zip Code 91011-3152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03147**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1222.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1154 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. PAULINE B. JONES</b>		Date of Receipt
Mailing Address 3091 MILL VISTA ROAD UNIT 1013		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
HIGHLANDS RANCH	CO	80129-2420
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI03148</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MS. PAULINE B. JONES</b>		Date of Receipt
Mailing Address 3091 MILL VISTA ROAD UNIT 1013		<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
HIGHLANDS RANCH	CO	80129-2420
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI03149</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. RICHARD H. JONES SR.</b>		Date of Receipt
Mailing Address 12916 BAY PLANTATION DRIVE		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
JACKSONVILLE	FL	32223-0784
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI03150</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
PEGASYSTEMS INC.	DIRECTOR	<input type="text" value="32400.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="32400.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="32650.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1155 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. ROBERT L. JONES JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 516 LEXINGTON AVENUE  
 City SAN ANTONIO State TX Zip Code 78215-1930  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03151**  
 Amount of Each Receipt this Period 100.00

**B. MS. RUTH M. JONES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 448 016TH STREET  
 City SANTA MONICA State CA Zip Code 90402-2234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03152**  
 Amount of Each Receipt this Period 220.00

**C. MRS. SUSAN ELIZABETH JONES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2759 FOUNTAIN VIEW  
 2759 FOUNTAIN VIEW  
 City ROMAN FOREST State TX Zip Code 77357-3191  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03153**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 370.00  
**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 1156 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DONITA E. JORDAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2104 N.W. 59TH TERRACE  
 City TOPEKA State KS Zip Code 66618-1810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03154**  
 Amount of Each Receipt this Period  
 201.00

**B. MR. ROBERT JORDAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4825 PINE RIDGE OVAL  
 City CLEVELAND State OH Zip Code 44131-4642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NORTH AMERICAN SWITCHGEAR, INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03155**  
 Amount of Each Receipt this Period  
 210.00

**C. MRS. JACQUELINE A. JOSEPH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6259 WOODLAKE DRIVE  
 City BUFORD State GA Zip Code 30518-1243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03156**  
 Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 446.00  
**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 1157 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. JACQUELINE A. JOSEPH</b>		Date of Receipt 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI03157</b>
Mailing Address 6259 WOODLAKE DRIVE		Amount of Each Receipt this Period 25.00
City BUFORD	State GA	
Zip Code 30518-1243		Aggregate Year-to-Date ▼ 246.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. MRS. JACQUELINE A. JOSEPH</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI03158</b>
Mailing Address 6259 WOODLAKE DRIVE		Amount of Each Receipt this Period 21.00
City BUFORD	State GA	
Zip Code 30518-1243		Aggregate Year-to-Date ▼ 246.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. MR. JOHN A. JOST</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI03159</b>
Mailing Address 1531 SLEEPING CHILD ROAD		Amount of Each Receipt this Period 75.00
City HAMILTON	State MT	
Zip Code 59840-9775		Aggregate Year-to-Date ▼ 276.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	121.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1158 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JOHN A. JOST**

Mailing Address 1531 SLEEPING CHILD ROAD

City HAMILTON	State MT	Zip Code 59840-9775
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2014

**Transaction ID : 2014M04L11AI03160**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**B. MR. RAY JOURNEY**

Mailing Address 20321 LEADWELL STREET

City WINNETKA	State CA	Zip Code 91306-3117
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2014

**Transaction ID : 2014M04L11AI03161**

Amount of Each Receipt this Period  
30.00

Full Name (Last, First, Middle Initial)  
**C. MR. RAY JOURNEY**

Mailing Address 20321 LEADWELL STREET

City WINNETKA	State CA	Zip Code 91306-3117
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2014

**Transaction ID : 2014M04L11AI03162**

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	56.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1159 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. RAY JOURNEY**

Mailing Address 20321 LEADWELL STREET

City WINNETKA State CA Zip Code 91306-3117

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03163**

Amount of Each Receipt this Period  
 40.00

Full Name (Last, First, Middle Initial)  
**B. MR. RAY JOURNEY**

Mailing Address 20321 LEADWELL STREET

City WINNETKA State CA Zip Code 91306-3117

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03164**

Amount of Each Receipt this Period  
 25.00

Full Name (Last, First, Middle Initial)  
**C. MR. RAY JOURNEY**

Mailing Address 20321 LEADWELL STREET

City WINNETKA State CA Zip Code 91306-3117

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03165**

Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 90.00

**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 1160 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. RAY JOURNEY**

Mailing Address 20321 LEADWELL STREET

City State Zip Code  
WINNETKA CA 91306-3117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03166**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**B. MS. JUDITH M. JOY**

Mailing Address 1407 WAVERLY ROAD

City State Zip Code  
HIGHLAND PARK IL 60035-3462

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF - EMPLOYED WRITER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03167**

Amount of Each Receipt this Period  
2000.00

Full Name (Last, First, Middle Initial)  
**C. MRS. CAROL JOYNER**

Mailing Address 283 S. BOOKCLIFF COURT

City State Zip Code  
FRUITA CO 81521-4200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03168**

Amount of Each Receipt this Period  
101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2126.00

**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 1161 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENNETH A. JUBAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7444 PICARDY AVENUE  
 City State Zip Code  
 BATON ROUGE LA 70808-4331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03169**  
 Amount of Each Receipt this Period  
 125.00

**B. MRS. MIRA A. JUBELA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 337  
 City State Zip Code  
 BOERNE TX 78006-0337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 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  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03170**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. LEWIS ALLEN JUDY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 132 EMIL LANE  
 City State Zip Code  
 PAUPACK PA 18451-7725  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03171**  
 Amount of Each Receipt this Period  
 100.00

**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 1162 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. KENNETH JUE</b>		Date of Receipt
Mailing Address 1362 W SAN JOSE AVE		M M M / D D D / Y Y Y Y Y Y 03 / 11 / 2014
City	State	Zip Code
FRESNO	CA	93711-3115
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03172</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		760.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	760.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. DONALD L. JUILLARD</b>		Date of Receipt
Mailing Address 6747 COUNTY ROAD 19		M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014
City	State	Zip Code
STRYKER	OH	43557-9760
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03173</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		110.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	221.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. DONALD L. JUILLARD</b>		Date of Receipt
Mailing Address 6747 COUNTY ROAD 19		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City	State	Zip Code
STRYKER	OH	43557-9760
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03174</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		111.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	221.00	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	981.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1163 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ELLA MAE JULIAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1737 S. ROAD F.  
 City JOHNSON State KS Zip Code 67855-8819  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03175**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. ADAM JULIUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7025 YELLOWSTONE BLVD APT 4P  
 City FOREST HILLS State NY Zip Code 11375-3167  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03176**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. ADAM JULIUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7025 YELLOWSTONE BLVD APT 4P  
 City FOREST HILLS State NY Zip Code 11375-3167  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03177**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 1164 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ADAM JULIUS**

Mailing Address 7025 YELLOWSTONE BLVD APT 4P  
4P

City State Zip Code  
FOREST HILLS NY 11375-3167

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A NONE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03178**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**B. MR. ADAM JULIUS**

Mailing Address 7025 YELLOWSTONE BLVD APT 4P  
4P

City State Zip Code  
FOREST HILLS NY 11375-3167

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A NONE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03179**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**C. MRS. NORMA W. JUNG-STEIN**

Mailing Address 1272 NOBLE DRIVE

City State Zip Code  
PORT BARRINGTON IL 60010-7063

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03180**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 170.00

**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 1165 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. NORMA W. JUNG-STEIN</b>		Date of Receipt
Mailing Address 1272 NOBLE DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014
City	State	Zip Code
PORT BARRINGTON	IL	60010-7063
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03181</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		1.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	241.00	

Full Name (Last, First, Middle Initial) <b>B. MS. PATRICIA JUNOD</b>		Date of Receipt
Mailing Address 5412 TREESIDE DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014
City	State	Zip Code
CARMICHAEL	CA	95608-5943
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03182</b>
Name of Employer REQUESTED		Amount of Each Receipt this Period
Occupation REQUESTED		250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	250.00	

Full Name (Last, First, Middle Initial) <b>C. MR. CLYDE A. JUSTMAN</b>		Date of Receipt
Mailing Address 1610 S. 108TH STREET		M M M / D D D / Y Y Y Y Y Y 03 / 13 / 2014
City	State	Zip Code
OMAHA	NE	68144-1808
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03183</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	551.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1166 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SHEILA KAGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18741 S. RIVER ROAD  
 City ALVA State FL Zip Code 33920-3643  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer A. KAGAN ORTHOPEDICS Occupation OFFICE MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03184**  
 Amount of Each Receipt this Period  
 120.00

**B. MRS. SHEILA KAGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18741 S. RIVER ROAD  
 City ALVA State FL Zip Code 33920-3643  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer A. KAGAN ORTHOPEDICS Occupation OFFICE MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03185**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. CLINT L. KAHLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10101-7TH AVENUE S.E.  
 APARTMENT 512  
 City EVERETT State WA Zip Code 98208-4751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation POLITICS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03186**  
 Amount of Each Receipt this Period  
 92.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	312.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1167 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CLINT L. KAHLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10101-7TH AVENUE S.E.  
 APARTMENT 512  
 City EVERETT State WA Zip Code 98208-4751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation POLITICS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03187**  
 Amount of Each Receipt this Period  
 53.00

**B. MS. JACQUELYN W. KAHLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12678 17TH STREET  
 City CHINO State CA Zip Code 91710-3634  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03188**  
 Amount of Each Receipt this Period  
 40.00

**C. MS. JACQUELYN W. KAHLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12678 17TH STREET  
 City CHINO State CA Zip Code 91710-3634  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03189**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 143.00  
**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 1168 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JACQUELYN W. KAHLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12678 17TH STREET  
 City CHINO State CA Zip Code 91710-3634  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03190**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. MATT KAHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15819 ROSEHAVEN LANE  
 City CANYON COUNTRY State CA Zip Code 91387-1867  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EMPLOYMENT SERVICES Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03191**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. ROBERT M. KAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5006 LODENBERRY COURT  
 City KATY State TX Zip Code 77494-4674  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 496.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03192**  
 Amount of Each Receipt this Period  
 331.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 481.00  
**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 1169 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BETTY MAE KAISER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4295 MARBLE MOUNTAIN ROAD REAR  
 City EL DORADO HILLS State CA Zip Code 95762-6694  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03193**  
 Amount of Each Receipt this Period  
 101.00

**B. MR. JOHN W. KAISER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5627 138TH STREET  
 City FLUSHING State NY Zip Code 11355-5039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ST JOHN'S UNIVERSITY Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03194**  
 Amount of Each Receipt this Period  
 250.00

**C. DR. MARIE LUISE SCHUBERT KALSI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13307 CAROUSEL COURT  
 City HOUSTON State TX Zip Code 77041-6572  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03195**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	451.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1170 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARA LOUISE KAMEROW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3509 CONNECTICUT AVE, NW #460

City WASHINGTON	State DC	Zip Code 20008-2400
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE
-----------------------------------	---------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03196**

Amount of Each Receipt this Period  
50.00

**B. MS. MARA LOUISE KAMEROW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3509 CONNECTICUT AVE, NW #460

City WASHINGTON	State DC	Zip Code 20008-2400
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE
-----------------------------------	---------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03197**

Amount of Each Receipt this Period  
500.00

**C. MR. JOSEPH KAMINSKY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4930 COQUINA CROSSING DRIVE

City ELKTON	State FL	Zip Code 32033-4034
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03198**

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	551.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1171 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. RADM. THOMAS A. KAMM U.S.N.R. (**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9226 LAKEWOOD DRIVE  
 City WINDSOR State CA Zip Code 95492-9298  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03199**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. ROLAND KANKEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 115 CIMMARON TRIAL  
 City ENON State OH Zip Code 45323-1653  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03200**  
 Amount of Each Receipt this Period  
 220.00

**C. MR. GILBERT B. KAPLAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18 AVALON COURT  
 City BETHESDA State MD Zip Code 20816-1124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING & SPALDING Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03201**  
 Amount of Each Receipt this Period  
 20000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	20320.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1172 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD KARAI SZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15834 WINDING CREEK COURT  
 City NORTHVILLE State MI Zip Code 48168-8455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NOVI PRECISION PRODUCTS Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03202**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. RONALD KARAI SZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15834 WINDING CREEK COURT  
 City NORTHVILLE State MI Zip Code 48168-8455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NOVI PRECISION PRODUCTS Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03203**  
 Amount of Each Receipt this Period  
 251.00

**C. MR. ROBERT EDWIN KARL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3005 LAPLATA DRIVE  
 City DAYTON State OH Zip Code 45420-1149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03204**  
 Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 611.00  
**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 1173 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GLENN KARPINSKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 637  
 City HANOVER State IL Zip Code 61041-0637  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03205**  
 Amount of Each Receipt this Period  
 220.00

**B. MS. KATHY KARTHEISER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 461 N. LAKE STREET APARTMENT 108  
 City AURORA State IL Zip Code 60506-4138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03206**  
 Amount of Each Receipt this Period  
 150.00

**C. MS. KATHY KARTHEISER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 461 N. LAKE STREET APARTMENT 108  
 City AURORA State IL Zip Code 60506-4138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03207**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 470.00  
**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 1174 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAN KASPARI**  
Full Name (Last, First, Middle Initial)

Mailing Address 7343 BORDMAN ROAD

City ALMONT State MI Zip Code 48003-8919

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03208**

Amount of Each Receipt this Period  
 100.00

**B. MR. JOSEPH E. KASPUTYS**  
Full Name (Last, First, Middle Initial)

Mailing Address 148 SANDY POND ROAD

City LINCOLN State MA Zip Code 01773-2605

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ENTREPRENEUR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03209**

Amount of Each Receipt this Period  
 1000.00

**C. MRS. JANICE W. KASSEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 207 PALMER STREET

City EMMETSBURG State IA Zip Code 50536-1153

FEC ID number of contributing federal political committee. **C**

Name of Employer MANAGER Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03210**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1150.00

**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 1175 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. JOSEPH KASSLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4810 SMOKEY RD  
 City NEWNAN State GA Zip Code 30263-4941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation ARCHITECT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03211**  
 Amount of Each Receipt this Period  
 250.00

**B. DR. MICHAEL DAVID KASTEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 601 JOHN STREET SUITE M206C  
 City KALAMAZOO State MI Zip Code 49007-5359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03212**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. CHRISTOPHER KASTNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 185 TOWERVIEW DRIVE UNIT 2108  
 City SAINT AUGUSTINE State FL Zip Code 32092-3624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03213**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 520.00  
**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 1176 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM H. KASTROLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1001 LIBERTY AVENUE  
 SUITE 850  
 City PITTSBURGH State PA Zip Code 15222-3718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HARBOUR RISK MANAGEMENT Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 7800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03214**  
 Amount of Each Receipt this Period  
 7800.00

**B. MR. JAMES H. KATSCHKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2349 E. BEMES ROAD  
 City CRETE State IL Zip Code 60417-4659  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03215**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JAMES H. KATSCHKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2349 E. BEMES ROAD  
 City CRETE State IL Zip Code 60417-4659  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03216**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7950.00  
**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 1177 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES H. KATSCHKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2349 E. BEMES ROAD  
 City State Zip Code  
 CRETE IL 60417-4659  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 311.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03217**  
 Amount of Each Receipt this Period  
 51.00

**B. MR. WILLIAM KATZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 263 GALLOWAY ROAD  
 City State Zip Code  
 STAMPING GROUND KY 40379-9075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED NONE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03218**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. WILLIAM KATZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 263 GALLOWAY ROAD  
 City State Zip Code  
 STAMPING GROUND KY 40379-9075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED NONE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03219**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 271.00  
**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 1178 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM KATZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 263 GALLOWAY ROAD

City STAMPING GROUND State KY Zip Code 40379-9075

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation NONE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03220**

Amount of Each Receipt this Period  
 10.00

**B. DR. JOSEPH A. KAUFMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1173 S. PANORAMA DRIVE

City CEDAR CITY State UT Zip Code 84720-6204

FEC ID number of contributing federal political committee. **C**

Name of Employer SOUTHWEST MEDICAL ASSOCIATES Occupation PHYSICIAN

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  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03221**

Amount of Each Receipt this Period  
 750.00

**C. MR. MITCHELL KAUFMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 54 SUMMIT PLACE

City PLEASANTVILLE State NY Zip Code 10570-1217

FEC ID number of contributing federal political committee. **C**

Name of Employer R. & N. CONSTRUCTION CORPORATION Occupation GENERAL CONTRACTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03222**

Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 880.00

**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 1179 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WAYNE C. KAUFMANN**  
Full Name (Last, First, Middle Initial)

Mailing Address 841 KINGSGATE DRIVE

City O'FALLON State MO Zip Code 63368-4799

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03223**

Amount of Each Receipt this Period  
 2000.00

**B. AMRIT KAUR**  
Full Name (Last, First, Middle Initial)

Mailing Address 15 WILDWOOD LANE

City MOUNTAIN TOP State PA Zip Code 18707-9663

FEC ID number of contributing federal political committee. **C**

Name of Employer LIBERTY TRUCK CENTER INC. Occupation EXECUTIVE

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  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03224**

Amount of Each Receipt this Period  
 200.00

**C. MR. ROBERT F. KAY SR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 5461 TYSHIRE PARKWAY

City PROVIDENCE FRG State VA Zip Code 23140-4426

FEC ID number of contributing federal political committee. **C**

Name of Employer JANNEY MONTGOMERY SCOTT, LLC Occupation INVESTMENT ADVISOR

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  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03225**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00

**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 1180 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. DOROTHY R. KAYE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12499 KAYE ROAD  
 City SUMNER State MO Zip Code 64681-9131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03226**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. MARVIN DALE KAYS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 102  
 City MORAN State TX Zip Code 76464-0102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03227**  
 Amount of Each Receipt this Period  
 60.00

**C. MR. MARVIN DALE KAYS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 102  
 City MORAN State TX Zip Code 76464-0102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03228**  
 Amount of Each Receipt this Period  
 121.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 281.00  
**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 1181 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. H. JAMES KEATS JR.</b>		Date of Receipt
Mailing Address 2000 S. EADS STREET APARTMENT 607		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
ARLINGTON	VA	22202-3109
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI03229</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	ATTORNEY	<input type="text" value="285.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="685.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. GEORGE R. KEELING</b>		Date of Receipt
Mailing Address P.O. BOX 1630		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
LEVELLAND	TX	79336-1630
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI03230</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF - EMPLOYED	INSURANCE AGENT	<input type="text" value="220.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. JOSEPH F. KEENAN</b>		Date of Receipt
Mailing Address 4476 TOSCA COURT		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
PLEASANTON	CA	94588-7004
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI03231</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	ATTORNEY	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="755.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 1182 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. DONALD M. KEENE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1825 SPRUCE CREEK BLVD.

City PORT ORANGE State FL Zip Code 32128-6742

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03232**

Amount of Each Receipt this Period  
 50.00

**B. DR. DONALD M. KEENE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1825 SPRUCE CREEK BLVD.

City PORT ORANGE State FL Zip Code 32128-6742

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03233**

Amount of Each Receipt this Period  
 30.00

**C. MR. LONNIE KEENE**  
Full Name (Last, First, Middle Initial)

Mailing Address 610 PARK AVENUE  
APARTMENT 3C

City NEW YORK State NY Zip Code 10065-7070

FEC ID number of contributing federal political committee. **C**

Name of Employer KROLL ASSOCIATES, INC. Occupation CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03234**

Amount of Each Receipt this Period  
 275.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 355.00

**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 1183 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CONNIE S. KEENEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 311 NYACK DRIVE  
 City CREVE COEUR State MO Zip Code 63141-8209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **350.00**

Date of Receipt: **03 / 20 / 2014**  
**Transaction ID : 2014M04L11AI03235**  
 Amount of Each Receipt this Period: **50.00**

**B. MR. JEROLD KEGLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 356  
 City FAULKTON State SD Zip Code 57438-0356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **KEGLER FARM** Occupation: **FARMER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI03236**  
 Amount of Each Receipt this Period: **300.00**

**C. MR. CHARLES A. KEHOE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 916 CALLE VISTOSO  
 City SANTA FE State NM Zip Code 87501-1032  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **COOK WORKS** Occupation: **RETAIL STORE OWNER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **275.00**

Date of Receipt: **03 / 28 / 2014**  
**Transaction ID : 2014M04L11AI03237**  
 Amount of Each Receipt this Period: **275.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>625.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1184 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. FRANCES KEIGLEY**

Mailing Address 221 CAROLINA MEADOWS VILLA

City State Zip Code  
CHAPEL HILL NC 27517-8506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03238**

Amount of Each Receipt this Period  
102.00

Full Name (Last, First, Middle Initial)  
**B. MR. J KEIM**

Mailing Address 7820 S. 31ST TERRACE

City State Zip Code  
PHOENIX AZ 85042-7122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03239**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MR. STEPHEN P. KEISER**

Mailing Address 5527 BEAVER LODGE DRIVE

City State Zip Code  
KINGWOOD TX 77345-1743

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
660.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03240**

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 352.00

**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 1185 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEPHEN P. KEISER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5527 BEAVER LODGE DRIVE  
 City KINGWOOD State TX Zip Code 77345-1743  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03241**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. EVELYN L. KEISLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 504 CALKS FERRY ROAD  
 City LEXINGTON State SC Zip Code 29072-8603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03242**  
 Amount of Each Receipt this Period  
 101.00

**C. MRS. EVELYN L. KEISLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 504 CALKS FERRY ROAD  
 City LEXINGTON State SC Zip Code 29072-8603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03243**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 202.00  
**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 1186 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BOB C. KEITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 103 LONDON COURT

City BRIDGEPORT State WV Zip Code 26330-1874

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03244**

Amount of Each Receipt this Period  
 70.00

**B. MR. DAVID L. KEITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 1775 WESTCHESTER DRIVE APARTMENT 116

City HIGH POINT State NC Zip Code 27262-7276

FEC ID number of contributing federal political committee. **C**

Name of Employer THE WASLEYAN CHURCH Occupation CLERGY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03245**

Amount of Each Receipt this Period  
 111.00

**C. MRS. JULIE A. KELLAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 8437 OWLWOODS LANE

City CINCINNATI State OH Zip Code 45243-1048

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03246**

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1181.00

**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 1187 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. SCOTT KELLER**

Mailing Address 2099 W MAGATSU CIR

City SAINT GEORGE State UT Zip Code 84770-7371

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : 2014M04L11AI03247**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. MS. VERA A. KELLER**

Mailing Address 15205 76TH STREET S.E.

City SNOHOMISH State WA Zip Code 98290-6157

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **251.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 28 / 2014**

**Transaction ID : 2014M04L11AI03248**

Amount of Each Receipt this Period  
**1.00**

Full Name (Last, First, Middle Initial)  
**C. MS. VERA A. KELLER**

Mailing Address 15205 76TH STREET S.E.

City SNOHOMISH State WA Zip Code 98290-6157

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **251.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : 2014M04L11AI03249**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **201.00**

**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 1188 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KELLY KELLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6201 MCINTYRE ST  
 City GOLDEN State CO Zip Code 80403-7446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REFUSED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03250**  
 Amount of Each Receipt this Period  
 150.00

**B. MRS. MARY KELLNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 E. WISCONSIN AVENUE SUITE 2200  
 City MILWAUKEE State WI Zip Code 53202-4110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03251**  
 Amount of Each Receipt this Period  
 32400.00

**C. MR. TED D. KELLNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5112 W. HIGHLAND ROAD  
 City THIENSVILLE State WI Zip Code 53092-1137  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FIDUCIARY MGMT, INC. Occupation CHAIRMAN & C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03252**  
 Amount of Each Receipt this Period  
 32400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	64950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1189 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. DONNA KELLOGG</b>		Date of Receipt 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI03253</b>
Mailing Address 11991 36TH STREET N.W.		Amount of Each Receipt this Period 100.00
City WATFORD CITY	State ND	Zip Code 58854-9633
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. ESTHER M. KELLOGG</b>		Date of Receipt 03 / 19 / 2014 <b>Transaction ID : 2014M04L11AI03254</b>
Mailing Address 339 MOUNT CURVE BLVD.		Amount of Each Receipt this Period 1000.00
City SAINT PAUL	State MN	Zip Code 55105-1217
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. DR. EUGENE L. KELLOGG</b>		Date of Receipt 03 / 19 / 2014 <b>Transaction ID : 2014M04L11AI03255</b>
Mailing Address 3671 N. CAMINO RIO SOLEADO		Amount of Each Receipt this Period 240.00
City TUCSON	State AZ	Zip Code 85718-6941
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1340.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1190 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. NORMA GEORGINA KELLOGG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5864 WILSON ROAD  
 City MARSHALL State VA Zip Code 20115-2503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03256**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. TOMMY N. KELLOGG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 875 TRYON STREET  
 City SOUTH GLASTONBURY State CT Zip Code 06073-3013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03257**  
 Amount of Each Receipt this Period  
 450.00

**C. MR. EDWARD F. KELLY JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 LONG MEADOW ROAD  
 City BEDFORD State NY Zip Code 10506-1119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TIME, INC. Occupation PUBLISHING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03258**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1070.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1191 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JAMES KELLY**

Mailing Address 345 KATHMERE ROAD

City State Zip Code  
HAVERTOWN PA 19083-3931

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED C.P.A.

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03259**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. JAMES L. KELLY**

Mailing Address 3733 CYPRESS CLUB DRIVE

City State Zip Code  
CHARLOTTE NC 28210-2461

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03260**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MRS. RUTH KELLY**

Mailing Address 83 CAMINO PACIFICO

City State Zip Code  
SANTA FE NM 87508-8957

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03261**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**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 1192 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS E. KELLY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4705 MIRAMONT CIRCLE  
 City BRYAN State TX Zip Code 77802-1709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03262**  
 Amount of Each Receipt this Period 100.00

**B. MR. WILLIAM KELLY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1209 CANVASBACK DRIVE  
 City GRANBURY State TX Zip Code 76048-2616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03263**  
 Amount of Each Receipt this Period 220.00

**C. COL. LOYAL L. KELSEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4250 W. 16TH STREET UNIT 18  
 City GREELEY State CO Zip Code 80634-3350  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03264**  
 Amount of Each Receipt this Period 40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 360.00  
**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 1194 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GORDON P. KEMMERER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 422 S.E. BIRDIE CIRCLE  
 City CEDAREEDGE State CO Zip Code 81413-3851  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03268**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. JAY L. KEMMERER III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 6848  
 City JACKSON State WY Zip Code 83002-6848  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KEMMERER RESOURCES CORP / JACKSON HOLE Occupation INVESTMENTS / SKI BUSINESS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03269**  
 Amount of Each Receipt this Period  
 32400.00

**C. MRS. NOREITA D. KEMPE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2332 NW BRITT TERRACE  
 City STUART State FL Zip Code 34994-9138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 381.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03270**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32610.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1195 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. NOREITA D. KEMPE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2332 NW BRITT TERRACE  
 City STUART State FL Zip Code 34994-9138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 381.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03271**  
 Amount of Each Receipt this Period  
 110.00

**B. MRS. NOREITA D. KEMPE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2332 NW BRITT TERRACE  
 City STUART State FL Zip Code 34994-9138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 381.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03272**  
 Amount of Each Receipt this Period  
 1.00

**C. MRS. GLENNA S. KENDALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9816 24TH AVENUE N.W.  
 City SEATTLE State WA Zip Code 98117-2507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03273**  
 Amount of Each Receipt this Period  
 205.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 316.00  
**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 1196 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID R. KENNEDY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 BAXTER LANE  
 City NASHVILLE State TN Zip Code 37220-1919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03274**  
 Amount of Each Receipt this Period 275.00

**B. MS. ELIZABETH C. KENNEDY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 TERRAPIN POINT  
 City VERO BEACH State FL Zip Code 32963-4407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03275**  
 Amount of Each Receipt this Period 250.00

**C. MS. ELIZABETH C. KENNEDY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 TERRAPIN POINT  
 City VERO BEACH State FL Zip Code 32963-4407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03276**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 625.00  
**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 1197 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GERALD F. KENNEDY**  
Full Name (Last, First, Middle Initial)

Mailing Address 18301 N.E. 184TH STREET

City BRUSH PRAIRIE State WA Zip Code 98606-8609

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03277**

Amount of Each Receipt this Period  
 400.00

**B. MR. MICHAEL KENNEDY**  
Full Name (Last, First, Middle Initial)

Mailing Address 12117 STEPHENS MOUNTAIN ROAD

City NORTHPORT State AL Zip Code 35475-3638

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03278**

Amount of Each Receipt this Period  
 100.00

**C. SHAWN OSBORN KENNINGTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 6332 COURTLAND DR.

City PLANO State TX Zip Code 75093-7823

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03279**

Amount of Each Receipt this Period  
 5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 505.00

**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 1198 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. SHAWN OSBORN KENNINGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6332 COURTLAND DR.  
 City PLANO State TX Zip Code 75093-7823  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03280**  
 Amount of Each Receipt this Period: 250.00

**B. MR. CHARLES J. KENNY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4590 KNIGHTSBRIDGE BLVD.  
 APARTMENT 134  
 City COLUMBUS State OH Zip Code 43214-4355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03281**  
 Amount of Each Receipt this Period: 20.00

**C. MR. CHARLES J. KENNY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4590 KNIGHTSBRIDGE BLVD.  
 APARTMENT 134  
 City COLUMBUS State OH Zip Code 43214-4355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI03282**  
 Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 320.00  
**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 1199 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HARRY KENT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 ROBERT STREET  
 City SOMERS State CT Zip Code 06071-1504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03283**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. HARRY KENT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 ROBERT STREET  
 City SOMERS State CT Zip Code 06071-1504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03284**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. VIRGINIA N. KENT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1483  
 City WALLA WALLA State WA Zip Code 99362-0027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation TRAVEL AGENCY OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03285**  
 Amount of Each Receipt this Period  
 100.00

**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 1200 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHAN KEO**  
Full Name (Last, First, Middle Initial)

Mailing Address 1571 COMMODORE BLVD.

City MELBOURNE	State FL	Zip Code 32935-4108
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
03	/	10	/	2014

**Transaction ID : 2014M04L11AI03286**

Amount of Each Receipt this Period  

115.00
--------

**B. MR. ROBERT E. KEPPEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 5045 PARK TERRACE

City MINNEAPOLIS	State MN	Zip Code 55436-1098
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
03	/	19	/	2014

**Transaction ID : 2014M04L11AI03287**

Amount of Each Receipt this Period  

50.00
-------

**C. MR. WILLIAM R. KERLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 PANTOPS MOUNTAIN ROAD  
APARTMENT 5203

City CHARLOTTESVILLE	State VA	Zip Code 22911-8680
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **370.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
03	/	12	/	2014

**Transaction ID : 2014M04L11AI03288**

Amount of Each Receipt this Period  

50.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>215.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1201 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOSEPH G. KERN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 44044 MERRILL ROAD  
 City State Zip Code  
 STERLING HEIGHTS MI 48314-1440  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03289**  
 Amount of Each Receipt this Period  
 201.00

**B. MR. NICK KERNICAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11723 GALE AVENUE  
 APARTMENT F.  
 City State Zip Code  
 HAWTHORNE CA 90250-2144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INGLEWOOD TECHNICAL CAD DESIGNER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 621.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03290**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. NICK KERNICAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11723 GALE AVENUE  
 APARTMENT F.  
 City State Zip Code  
 HAWTHORNE CA 90250-2144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INGLEWOOD TECHNICAL CAD DESIGNER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 621.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03291**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	401.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1202 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. NICK KERNICAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11723 GALE AVENUE  
 APARTMENT F.  
 City HAWTHORNE State CA Zip Code 90250-2144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INGLEWOOD Occupation TECHNICAL CAD DESIGNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 621.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03292**  
 Amount of Each Receipt this Period  
 111.00

**B. MS. MAXINE KERNS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 215 SE DEBELL AVENUE  
 APARTMENT 28  
 City BARTLESVILLE State OK Zip Code 74006-2312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03293**  
 Amount of Each Receipt this Period  
 50.00

**C. MS. MAXINE KERNS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 215 SE DEBELL AVENUE  
 APARTMENT 28  
 City BARTLESVILLE State OK Zip Code 74006-2312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03294**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	262.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1203 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. WILLIAM D. KERNS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 322  
 City HARVARD State MA Zip Code 01451-0322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ACCELLIENT PARTNERS Occupation C.E.O.  
 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  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03295**  
 Amount of Each Receipt this Period  
 200.00

**B. DR. WILLIAM D. KERNS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 322  
 City HARVARD State MA Zip Code 01451-0322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ACCELLIENT PARTNERS Occupation C.E.O.  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03296**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. SHIRLEY D. KERR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14206 CLEAR CREEK STREET  
 City SAN ANTONIO State TX Zip Code 78232-4407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03297**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 401.00  
**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 1204 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. A. REIF KESSLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6524 FAIRWAY VIEW TRAIL  
 City ROANOKE State VA Zip Code 24018-7470  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI03298**  
 Amount of Each Receipt this Period  
 1.00

**B. DR. BRIAN ALAN KICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 7197  
 City SPANISH FORT State AL Zip Code 36577-7197  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03299**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. G. BRUCE KIDD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 714 GREEN LANE  
 City JOHNSON CITY State TN Zip Code 37601-3300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03300**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	221.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1205 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. G. BRUCE KIDD</b>		Date of Receipt
Mailing Address 714 GREEN LANE		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
JOHNSON CITY	TN	37601-3300
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI03301</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="120.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="460.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MS. ALICE D. KIDWELL</b>		Date of Receipt
Mailing Address 8810 WALTHER BLVD. APARTMENT 3306		<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
PARKVILLE	MD	21234-5771
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI03302</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="206.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MS. ALICE D. KIDWELL</b>		Date of Receipt
Mailing Address 8810 WALTHER BLVD. APARTMENT 3306		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code
PARKVILLE	MD	21234-5771
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI03303</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="206.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="165.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 1206 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. ALICE D. KIDWELL</b>		Date of Receipt 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI03304</b>
Mailing Address 8810 WALTHER BLVD. APARTMENT 3306		Amount of Each Receipt this Period 31.00
City PARKVILLE	State MD	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 206.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MRS. GENEVIEVE J. KIEFER</b>		Date of Receipt 03 / 04 / 2014 <b>Transaction ID : 2014M04L11AI03305</b>
Mailing Address 733 PERRY STREET		Amount of Each Receipt this Period 120.00
City DUBUQUE	State IA	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 220.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MRS. GENEVIEVE J. KIEFER</b>		Date of Receipt 03 / 19 / 2014 <b>Transaction ID : 2014M04L11AI03306</b>
Mailing Address 733 PERRY STREET		Amount of Each Receipt this Period 100.00
City DUBUQUE	State IA	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 220.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	251.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1207 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. WILLIAM KIESSEL</b>		Date of Receipt
Mailing Address 9077 RICHARDS DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 18 / 2014
City	State	Zip Code
MENTOR	OH	44060-1629
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03307
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		150.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	250.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. ANN J. KIGER</b>		Date of Receipt
Mailing Address 5028 MIAMI TRACE ROAD		M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014
City	State	Zip Code
GREENFIELD	OH	45123-9614
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03308
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		50.00
Name of Employer	Occupation	
SELF-EMPLOYED	LEGAL	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	211.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. ANN J. KIGER</b>		Date of Receipt
Mailing Address 5028 MIAMI TRACE ROAD		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2014
City	State	Zip Code
GREENFIELD	OH	45123-9614
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03309
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		50.00
Name of Employer	Occupation	
SELF-EMPLOYED	LEGAL	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	211.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1208 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. ANN J. KIGER**

Mailing Address 5028 MIAMI TRACE ROAD

City State Zip Code  
GREENFIELD OH 45123-9614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED LEGAL

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03310**

Amount of Each Receipt this Period  
56.00

Full Name (Last, First, Middle Initial)  
**B. MR. RUSSELL KIKO**

Mailing Address 2722 FULTON DRIVE NW

City State Zip Code  
CANTON OH 44718-3506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03311**

Amount of Each Receipt this Period  
75.00

Full Name (Last, First, Middle Initial)  
**C. MR. RUSSELL KIKO**

Mailing Address 2722 FULTON DRIVE NW

City State Zip Code  
CANTON OH 44718-3506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03312**

Amount of Each Receipt this Period  
115.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 246.00

**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 1209 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM M. KILLEBREW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2620 LEJUENE DRIVE  
 APARTMENT 10208  
 City BILOXI State MS Zip Code 39531-3742  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03313**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. JOHN E. KILLEEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1154 BIG ROCK LOOP  
 City LOS ALAMOS State NM Zip Code 87544-2805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation SECURITY EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03314**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. MARY KILLINGSTAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20675 CYPRESS RANCH  
 City CASTRO VALLEY State CA Zip Code 94552-2654  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WESTERN HYTHO CORPORATION Occupation EXECUTIVE ASSISTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03315**  
 Amount of Each Receipt this Period  
 400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 770.00  
**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 1210 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FREDERICK VON KIM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 276 2ND AVENUE  
 City SAN FRANCISCO State CA Zip Code 94118-2412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE W.S.13 & ASSOCIATES Occupation SECURITY GUARD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 516.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03316**  
 Amount of Each Receipt this Period  
 216.00

**B. MR. GEORGE T. KIMBELL II**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2404 FARINGTON  
 City WICHITA FALLS State TX Zip Code 76308-1907  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BURK ROYALTY CO. LTD. Occupation OIL AND GAS EXPLORATION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03317**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. WILLIAM KIMBERLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6437 FM 1769  
 City OLNEY State TX Zip Code 76374-6401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03318**  
 Amount of Each Receipt this Period  
 235.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1451.00  
**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 1211 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE T. KIMBELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 94903  
 City WICHITA FALLS State TX Zip Code 76308-0903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BURK ROYALTY COMPANY L.T.D. Occupation OIL & GAS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03319**  
 Amount of Each Receipt this Period 120.00

**B. MR. GENE KIMMEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9615 BOULEVARD DRIVE  
 City HIGHLAND State IN Zip Code 46322-3048  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03320**  
 Amount of Each Receipt this Period 150.00

**C. MRS. CAROL KIMMELMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 OVERLEIGH ROAD  
 City BERNARDSVILLE State NJ Zip Code 07924-1519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03321**  
 Amount of Each Receipt this Period 25000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 25270.00  
**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 1212 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DOUGLAS KIMMELMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 OVERLEIGH ROAD  
 City BERNARDSVILLE State NJ Zip Code 07924-1519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ENERGY CAPITAL PARTNERS Occupation INVESTMENT FUND MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03322**  
 Amount of Each Receipt this Period  
 25000.00

**B. MR. DAVID KINCANNON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 36  
 City STEPHENVILLE State TX Zip Code 76401-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INSURANCE AGENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03323**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. JANET F. KINDLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1365 S. 13TH STREET  
 City COSHOCTON State OH Zip Code 43812-2606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03324**  
 Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 25135.00  
**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 1213 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JANET F. KINDLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1365 S. 13TH STREET  
 City COSHOCTON State OH Zip Code 43812-2606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03325**  
 Amount of Each Receipt this Period  
 60.00

**B. MS. JANET F. KINDLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1365 S. 13TH STREET  
 City COSHOCTON State OH Zip Code 43812-2606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03326**  
 Amount of Each Receipt this Period  
 25.00

**C. MS. JANET F. KINDLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1365 S. 13TH STREET  
 City COSHOCTON State OH Zip Code 43812-2606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03327**  
 Amount of Each Receipt this Period  
 26.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 111.00  
**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 1214 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALDUS RAY KING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 NEWPORT PIKE  
 City State Zip Code  
 GAP PA 17527-9698  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED SALES  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03328**  
 Amount of Each Receipt this Period  
 120.00

**B. MS. JEAN KING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15538 PARKWOOD DRIVE S.  
 City State Zip Code  
 GULFPORT MS 39503-2722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03329**  
 Amount of Each Receipt this Period  
 50.00

**C. MS. JEAN KING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15538 PARKWOOD DRIVE S.  
 City State Zip Code  
 GULFPORT MS 39503-2722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03330**  
 Amount of Each Receipt this Period  
 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1215 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. JEAN KING**

Mailing Address 15538 PARKWOOD DRIVE S.

City State Zip Code  
GULFPORT MS 39503-2722

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03331**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**B. DR. JOSEPH C. KING**

Mailing Address 2 CLEMSON STREET

City State Zip Code  
RANCHO MIRAGE CA 92270-3129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03332**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**C. DR. JOSEPH C. KING**

Mailing Address 2 CLEMSON STREET

City State Zip Code  
RANCHO MIRAGE CA 92270-3129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03333**

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 127.00

**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 1216 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. QUINCY KING**  
Full Name (Last, First, Middle Initial)

Mailing Address 60 WEST HIGHLAND AVENUE  
60 WEST HIGHLAND AVENUE

City MELROSE State MA Zip Code 02176-1246

FEC ID number of contributing federal political committee. **C**

Name of Employer CAPE COD HOSPITAL Occupation PHYSICIAN ASSISTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
03 / 18 / 2014  
Transaction ID : 2014M04L11AI03334

Amount of Each Receipt this Period  
50.00

**B. MS. REBECCA LYNN KING**  
Full Name (Last, First, Middle Initial)

Mailing Address 1350 S MARYLAND AVE

City SPRINGFIELD State MO Zip Code 65807-1754

FEC ID number of contributing federal political committee. **C**

Name of Employer VERIZON WIRELESS Occupation TECHNICAL STAFF

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
03 / 07 / 2014  
Transaction ID : 2014M04L11AI03335

Amount of Each Receipt this Period  
500.00

**C. MR. RUSSELL KING**  
Full Name (Last, First, Middle Initial)

Mailing Address 8696 HALE ROAD

City MANLIUS State NY Zip Code 13104-8781

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
03 / 11 / 2014  
Transaction ID : 2014M04L11AI03336

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 650.00

**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 1217 OF 2949
	<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	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. RUSSELL KING</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014 <b>Transaction ID : 2014M04L11AI03337</b>
Mailing Address 8696 HALE ROAD		Amount of Each Receipt this Period 150.00
City MANLIUS	State NY	Zip Code 13104-8781
FEC ID number of contributing federal political committee. C	Name of Employer RETIRED	Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B. MR. MICHAEL J. KINKELAAR</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI03338</b>
Mailing Address 1722 MALDEN STREET		Amount of Each Receipt this Period 181.00
City SAN DIEGO	State CA	Zip Code 92109-2206
FEC ID number of contributing federal political committee. C	Name of Employer PROCOPIO, CORY, HARGREAVES & SAVITCH	Occupation ATTORNEY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.00	

Full Name (Last, First, Middle Initial) <b>C. MR. PETER D. KINNEAR</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 05 / 2014 <b>Transaction ID : 2014M04L11AI03339</b>
Mailing Address 78 ANGELOU WAY		Amount of Each Receipt this Period 1000.00
City THE WOODLANDS	State TX	Zip Code 77382-1728
FEC ID number of contributing federal political committee. C	Name of Employer RETIRED	Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1331.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1218 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES KINSINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21380 WASHINGTON ROAD  
 City DEER CREEK State IL Zip Code 61733-9436  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03340**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. MARVIN KENNETH KINZLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 348 17TH STREET NW  
 City WILLMAR State MN Zip Code 56201-2421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03341**  
 Amount of Each Receipt this Period  
 201.00

**C. MS. PATRICIA A. KIRBY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17 WILD ROSE COURT  
 City COLUMBIA State SC Zip Code 29229-8867  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03342**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 551.00  
**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 1219 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LOIS M. KIRCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 356  
 City State Zip Code  
 WALLOON LAKE MI 49796-0356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03343**  
 Amount of Each Receipt this Period  
 750.00

**B. MR. JOHN KIRK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16 BODDINGTON COURT  
 City State Zip Code  
 ASHEVILLE NC 28803-3149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 406.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI03344**  
 Amount of Each Receipt this Period  
 406.00

**C. MR. MEL L. KIRKHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 397 E. 200 S,  
 City State Zip Code  
 LEHI UT 84043-9701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED BANKING  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03345**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1181.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1220 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. NORMA L. KIRKPATRICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 570 W. PENN AVENUE  
 City ROSEVILLE State IL Zip Code 61473-9651  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 850.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03346**  
 Amount of Each Receipt this Period  
 200.00

**B. MRS. CELIA KIRKWOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6258 S. GARLING ROAD  
 City CASPER State WY Zip Code 82601-6647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03347**  
 Amount of Each Receipt this Period  
 220.00

**C. MRS. MARGARET KITCHEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 208 ARBORWAY STREET  
 City HOUSTON State TX Zip Code 77057-1320  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INVESTOR INVESTOR  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03348**  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 570.00  
**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 1221 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARGARET KITCHEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 208 ARBORWAY STREET  
 City HOUSTON State TX Zip Code 77057-1320  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INVESTOR Occupation INVESTOR  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03349**  
 Amount of Each Receipt this Period  
 150.00

**B. MR. HOWARD R. KITE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1095 PARK LANE  
 City GULF BREEZE State FL Zip Code 32563-3331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03350**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. HOWARD R. KITE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1095 PARK LANE  
 City GULF BREEZE State FL Zip Code 32563-3331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03351**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 370.00  
**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 1222 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. LOWELL EUGENE KITTLESON</b>		Date of Receipt
Mailing Address 4194 HIGHWAY 218		M M M / D D D / Y Y Y Y Y Y 03 / 13 / 2014
City	State	Zip Code
OSAGE	IA	50461-8206
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03352
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		50.00
Name of Employer	Occupation	
KITTLESON FARM INC.	FARM WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	250.00	

Full Name (Last, First, Middle Initial) <b>B. MR. LOWELL EUGENE KITTLESON</b>		Date of Receipt
Mailing Address 4194 HIGHWAY 218		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014
City	State	Zip Code
OSAGE	IA	50461-8206
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03353
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		50.00
Name of Employer	Occupation	
KITTLESON FARM INC.	FARM WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	250.00	

Full Name (Last, First, Middle Initial) <b>C. MR. MICHAEL E. KLACKING</b>		Date of Receipt
Mailing Address 10756 I. DRIVE N.		M M M / D D D / Y Y Y Y Y Y 03 / 18 / 2014
City	State	Zip Code
BATTLE CREEK	MI	49014-7962
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03354
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		45.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	205.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	145.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1223 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. R. HENRY KLEEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1230 WILSON DRIVE  
 City LAKE FOREST State IL Zip Code 60045-3547  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 KIRKLAND & ELLIS LLP ATTORNEY  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03355**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. ARTHUR C. KLEIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 668 SILVER OAK GROVE  
 City COLORADO SPRINGS State CO Zip Code 80906-8624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED GENERAL CONTRACTOR  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03356**  
 Amount of Each Receipt this Period  
 500.00

**C. DR. WILLIAM KLEIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 102 SPRING CREST COURT  
 City BONAIRE State GA Zip Code 31005-4023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PHYSICIAN  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03357**  
 Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 910.00  
**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 1224 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. EUNICE KLEMPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1120 N. 12TH STREET  
 APARTMENT 7  
 City BISMARCK State ND Zip Code 58501-4225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03358**  
 Amount of Each Receipt this Period  
 200.00

**B. DR. KARL G. KLINGES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4731 BONITA BAY BLVD.  
 8543 VIA LUNGOMARE CIRCLE  
 City ESTERO State FL Zip Code 33928-2495  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03359**  
 Amount of Each Receipt this Period  
 205.00

**C. DR. MORRIS J. KLOOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2100 ST. CHARLES AVENUE  
 APARTMENT 6L  
 City NEW ORLEANS State LA Zip Code 70130-7100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03360**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	505.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1225 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. MORRIS J. KLOOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2100 ST. CHARLES AVENUE  
 APARTMENT 6L  
 City NEW ORLEANS State LA Zip Code 70130-7100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03361**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. JEFFREY A. KLOPF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 707 JOAQUIN LANE  
 City SANTA FE State NM Zip Code 87505-6099  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HUNT CONSOLIDATED Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03362**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. HOWARD KLOTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 164 TANASI LAGOON DRIVE  
 City LOUDON State TN Zip Code 37774-2984  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03363**  
 Amount of Each Receipt this Period  
 106.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 406.00  
**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 1226 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD A. KNAGGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 715 COLWYN TERRACE

City DEERFIELD	State IL	Zip Code 60015-3111
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
311.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03364**

Amount of Each Receipt this Period  
 120.00

**B. MR. EDWARD A. KNAGGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 715 COLWYN TERRACE

City DEERFIELD	State IL	Zip Code 60015-3111
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
311.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03365**

Amount of Each Receipt this Period  
 100.00

**C. MR. EDWARD A. KNAGGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 715 COLWYN TERRACE

City DEERFIELD	State IL	Zip Code 60015-3111
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
311.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03366**

Amount of Each Receipt this Period  
 91.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	311.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1227 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ERIC D. KNAPP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 51494 AUTUMN RIDGE DRIVE  
 City GRANGER State IN Zip Code 46530-7011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ELKHART CLINIC, LLC Occupation SURGEON  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03367**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. GEORGE KNAPP JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 KINGSTON MANOR DRIVE  
 City SAINT LOUIS State MO Zip Code 63124-1913  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03368**  
 Amount of Each Receipt this Period  
 45.00

**C. MR. GEORGE KNAPP JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 KINGSTON MANOR DRIVE  
 City SAINT LOUIS State MO Zip Code 63124-1913  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03369**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	345.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1228 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. HONORABLE JAMES I. K. KNAPP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7450 ROSSMORE COURT  
 City DAYTON State OH Zip Code 45459-4213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SOCIAL SECURITY ADMINISTRATION Occupation ADMINISTRATIVE LAW JUDGE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03370**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. RICHARD G. KNAPP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1400 N. DRAKE ROAD APARTMENT 177  
 City KALAMAZOO State MI Zip Code 49006-1969  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03371**  
 Amount of Each Receipt this Period  
 275.00

**C. MR. RICHARD G. KNAPP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1400 N. DRAKE ROAD APARTMENT 177  
 City KALAMAZOO State MI Zip Code 49006-1969  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03372**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	975.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1229 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE M. KNEBEL JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5603 EXUM DRIVE  
 City WEST COLUMBIA State SC Zip Code 29169-7181  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI03373**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. BARBARA F. KNEEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 QUINTARD AVENUE  
 City OLD GREENWICH State CT Zip Code 06870-2105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03374**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. KENNETH KNEPP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 310 W. BURTON AVENUE  
 City EUREKA State IL Zip Code 61530-1306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03375**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1230 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENNETH KNEPP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 310 W. BURTON AVENUE  
 City EUREKA State IL Zip Code 61530-1306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03376**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. KENNETH KNEPP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 310 W. BURTON AVENUE  
 City EUREKA State IL Zip Code 61530-1306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03377**  
 Amount of Each Receipt this Period  
 1.00

**C. MRS. KATHERINE G. KNEZ-PHILLIPS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5617 N. CAMINO DEL SOL  
 City TUCSON State AZ Zip Code 85718-4407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03378**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1231 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. KATHERINE G. KNEZ-PHILLIPS</b>		Date of Receipt
Mailing Address 5617 N. CAMINO DEL SOL		M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014
City State Zip Code TUCSON AZ 85718-4407		<b>Transaction ID : 2014M04L11AI03379</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.00	

Full Name (Last, First, Middle Initial) <b>B. MR. DOUGLAS KNICKERBOCKER</b>		Date of Receipt
Mailing Address 23287 WATER CIRCLE		M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2014
City State Zip Code BOCA RATON FL 33486-8538		<b>Transaction ID : 2014M04L11AI03380</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. MR. GARY D. KNIGHT</b>		Date of Receipt
Mailing Address 46141 SEABISCUIT COURT		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014
City State Zip Code LEXINGTON PARK MD 20653-2091		<b>Transaction ID : 2014M04L11AI03381</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	126.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1232 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWIN M. KNIGHTS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 ALLDS STREET  
 APARTMENT 112  
 City NASHUA State NH Zip Code 03060-4778  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03382**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. EDWIN M. KNIGHTS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 ALLDS STREET  
 APARTMENT 112  
 City NASHUA State NH Zip Code 03060-4778  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03383**  
 Amount of Each Receipt this Period  
 1.00

**C. MS. MICHELE KNOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6966 ALDREN ROAD  
 City RAPID CITY State SD Zip Code 57702-8698  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03384**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 301.00  
**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 1233 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT KNOLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1370 OLD OAK HILL DRIVE  
 City ADA State MI Zip Code 49301-9408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INTERGRITY BUSINESS SOLUTIONS LLC Occupation EXECUTIVE  
 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  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03385**  
 Amount of Each Receipt this Period  
**300.00**

**B. MS. MARION KNOTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 41 ROYAL SAINT GEORGE  
 City NEWPORT BEACH State CA Zip Code 92660-5221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03386**  
 Amount of Each Receipt this Period  
**1000.00**

**C. MR. CHESTER L. KNOWLES JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 654 PLEASANT POINT ROAD  
 City CUSHING State ME Zip Code 04563-3425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1100.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03387**  
 Amount of Each Receipt this Period  
**50.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1350.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1234 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHESTER L. KNOWLES JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 654 PLEASANT POINT ROAD  
 City CUSHING State ME Zip Code 04563-3425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03388**  
 Amount of Each Receipt this Period 750.00

**B. MR. CHESTER L. KNOWLES JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 654 PLEASANT POINT ROAD  
 City CUSHING State ME Zip Code 04563-3425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03389**  
 Amount of Each Receipt this Period 100.00

**C. MS. DORIS M. KNOX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23144 S. SHORE DRIVE  
 City EDWARDSBURG State MI Zip Code 49112-8502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03390**  
 Amount of Each Receipt this Period 221.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1071.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1235 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. MAXINE L. KNOX</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI03391</b>
Mailing Address 2100 N. WISCONSIN STREET APARTMENT 222		Amount of Each Receipt this Period 100.00
City MITCHELL	State SD	
Zip Code 57301-1026		Aggregate Year-to-Date ▼ 201.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MRS. MAXINE L. KNOX</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI03392</b>
Mailing Address 2100 N. WISCONSIN STREET APARTMENT 222		Amount of Each Receipt this Period 101.00
City MITCHELL	State SD	
Zip Code 57301-1026		Aggregate Year-to-Date ▼ 201.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MRS. AIKO S. KOBAYASHI</b>		Date of Receipt 03 / 11 / 2014 <b>Transaction ID : 2014M04L11AI03393</b>
Mailing Address 1158 KEALAOLU AVENUE		Amount of Each Receipt this Period 250.00
City HONOLULU	State HI	
Zip Code 96816-5419		Aggregate Year-to-Date ▼ 1250.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	451.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1236 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. AIKO S. KOBAYASHI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1158 KEALAOLU AVENUE  
 City HONOLULU State HI Zip Code 96816-5419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03394**  
 Amount of Each Receipt this Period 500.00

**B. MR. RICHARD KOCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3220 PROSPERITY CHURCH ROAD SUITE 201  
 City CHARLOTTE State NC Zip Code 28269-8250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF - EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03395**  
 Amount of Each Receipt this Period 220.00

**C. MR. KEVIN KOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 331 PEACH STREET  
 City CINCINNATI State OH Zip Code 45246-3509  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DATACEUTICS Occupation SAS PROGRAMMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03396**  
 Amount of Each Receipt this Period 52.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	772.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1237 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD A. KOECHLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5411 CONCORD STREET  
 City BOSSIER CITY State LA Zip Code 71111-5505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03397**  
 Amount of Each Receipt this Period  
 30.00

**B. MR. EDWARD A. KOECHLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5411 CONCORD STREET  
 City BOSSIER CITY State LA Zip Code 71111-5505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03398**  
 Amount of Each Receipt this Period  
 30.00

**C. MR. EDWARD A. KOECHLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5411 CONCORD STREET  
 City BOSSIER CITY State LA Zip Code 71111-5505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03399**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00  
**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 1238 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD A. KOECHLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 5411 CONCORD STREET

City BOSSIER CITY State LA Zip Code 71111-5505

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03400**

Amount of Each Receipt this Period  
 300.00

**B. MR. MARVIN C. KOEPER**  
Full Name (Last, First, Middle Initial)

Mailing Address 10791 W. 92ND STREET N.

City RHODES State IA Zip Code 50234-8805

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation LIVESTOCK FARMING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03401**

Amount of Each Receipt this Period  
 100.00

**C. MR. MARVIN C. KOEPER**  
Full Name (Last, First, Middle Initial)

Mailing Address 10791 W. 92ND STREET N.

City RHODES State IA Zip Code 50234-8805

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation LIVESTOCK FARMING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03402**

Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 231.00

**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 1239 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KAYLA L. KOERBER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 LILAC DRIVE  
 City NEW BADEN State IL Zip Code 62265-2212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 322.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03403**  
 Amount of Each Receipt this Period 100.00

**B. MRS. KAYLA L. KOERBER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 LILAC DRIVE  
 City NEW BADEN State IL Zip Code 62265-2212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 322.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03404**  
 Amount of Each Receipt this Period 2.00

**C. MR. STANLEY W. KOHLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 801 E. EDGEMONT AVENUE  
 City PHOENIX State AZ Zip Code 85006-1033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 237.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03405**  
 Amount of Each Receipt this Period 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 137.00  
**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 1240 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STANLEY W. KOHLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 801 E. EDGEMONT AVENUE

City PHOENIX State AZ Zip Code 85006-1033

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 237.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03406**

Amount of Each Receipt this Period  
 35.00

**B. MR. STANLEY W. KOHLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 801 E. EDGEMONT AVENUE

City PHOENIX State AZ Zip Code 85006-1033

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 237.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03407**

Amount of Each Receipt this Period  
 41.00

**C. MR. STANLEY W. KOHLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 801 E. EDGEMONT AVENUE

City PHOENIX State AZ Zip Code 85006-1033

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 237.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03408**

Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 77.00

**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 1241 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. DALE KOHLMOOS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 914  
 City ESTACADA State OR Zip Code 97023-0914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation NEPA SPEICALIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03409**  
 Amount of Each Receipt this Period  
 30.00

**B. MS. DALE KOHLMOOS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 914  
 City ESTACADA State OR Zip Code 97023-0914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation NEPA SPEICALIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03410**  
 Amount of Each Receipt this Period  
 35.00

**C. MS. DALE KOHLMOOS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 914  
 City ESTACADA State OR Zip Code 97023-0914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation NEPA SPEICALIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03411**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1242 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. DALE KOHLMOOS**

Mailing Address P.O. BOX 914

City ESTACADA State OR Zip Code 97023-0914

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation NEPA SPEICALIST

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI03412**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**B. YELENA V. KOLCHINA**

Mailing Address 24 HIGHLAND VIEW DR

City SUTTON State MA Zip Code 01590-2997

FEC ID number of contributing federal political committee. **C**

Name of Employer UMASS MEDICAL SCHOOL Occupation REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 12 / 2014**  
**Transaction ID : 2014M04L11AI03413**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**C. MRS. MAUREEN M. KOLOSVARY**

Mailing Address 104 SUMMERFIELD ROAD

City CHEVY CHASE State MD Zip Code 20815-3317

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 13 / 2014**  
**Transaction ID : 2014M04L11AI03414**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **550.00**

**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 1243 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DONNA F. KOLTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 215 ACACIA AVENUE  
 City MONROVIA State CA Zip Code 91016-2105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03415**  
 Amount of Each Receipt this Period  
 30.00

**B. MRS. DONNA F. KOLTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 215 ACACIA AVENUE  
 City MONROVIA State CA Zip Code 91016-2105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03416**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. DONNA F. KOLTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 215 ACACIA AVENUE  
 City MONROVIA State CA Zip Code 91016-2105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03417**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 81.00  
**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 1244 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DONNA F. KOLTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 215 ACACIA AVENUE  
 City MONROVIA State CA Zip Code 91016-2105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03418**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. TADEUSZ KONDRATOWICZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 OAK STREET  
 City TEANECK State NJ Zip Code 07666-3826  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BEAU STEVOUS & COMPANY INCORPORATED Occupation COMPLIANCE MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03419**  
 Amount of Each Receipt this Period  
 120.00

**C. VADM. ALBERT H. KONETZNI JR. USNR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 828 OAKLETTE AVENUE  
 City CHESAPEAKE State VA Zip Code 23325-2308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer OCEANEERING INTERNATIONAL, INC. Occupation VP TRAFFIC BUSINESS PROGRAM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03420**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 470.00  
**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 1245 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. VADM. ALBERT H. KONETZNI JR. USNR**

Mailing Address **828 OAKLETTE AVENUE**

City **CHESAPEAKE** State **VA** Zip Code **23325-2308**

FEC ID number of contributing federal political committee. **C**

Name of Employer **OCEANEERING INTERNATIONAL, INC.** Occupation **VP TRAFFIC BUSINESS PROGRAM**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt  
**03 / 21 / 2014**  
**Transaction ID : 2014M04L11AI03421**

Amount of Each Receipt this Period  
**125.00**

Full Name (Last, First, Middle Initial)  
**B. MRS. ALICE STOCKTON KONZE**

Mailing Address **7318 RIVERHILL ROAD**

City **OXON HILL** State **MD** Zip Code **20745-1031**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt  
**03 / 11 / 2014**  
**Transaction ID : 2014M04L11AI03422**

Amount of Each Receipt this Period  
**15.00**

Full Name (Last, First, Middle Initial)  
**C. MRS. BRADLEY KOON**

Mailing Address **16271 MANDALAY CIRCLE**

City **HUNTINGTON BEACH** State **CA** Zip Code **92649-2107**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **361.00**

Date of Receipt  
**03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI03423**

Amount of Each Receipt this Period  
**1.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **141.00**

**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 1246 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL J. KOPEC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8 OTTER CREEK ROAD  
 City State Zip Code  
 SKILLMAN NJ 08558-2364  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03424**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. WILLIAM J. KORNITZER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 W. 49TH TERRACE  
 APARTMENT 2186  
 City State Zip Code  
 KANSAS CITY MO 64112-2541  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 516.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI03425**  
 Amount of Each Receipt this Period  
 216.00

**C. DR. STEPHEN KORTE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1635  
 City State Zip Code  
 BISMARCK ND 58502-1635  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03426**  
 Amount of Each Receipt this Period  
 700.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1116.00  
**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 1247 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD KOSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2125 BLANCHE LNAE  
 City MERRICK State NY Zip Code 11566-5500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SHERALVEN ENTERPRISES Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03427**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. LORRAINE Y. KOTCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19611 CLOVERWOOD CIRCLE  
 City HUNTINGTON BEACH State CA Zip Code 92648-6644  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 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  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03428**  
 Amount of Each Receipt this Period  
 800.00

**C. MS. CECILIA KOUNS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1504 23RD AVENUE N.  
 City TEXAS CITY State TX Zip Code 77590-5251  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03429**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2050.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1248 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DAVID KOURI**

Mailing Address 8225 MARSH POINTE DRIVE

City MONTGOMERY      State AL      Zip Code 36117-7432

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED      Occupation REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03430**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MRS. LAURA KRAFT**

Mailing Address 9721 TRAIL RIDER DRIVE

City LAS VEGAS      State NV      Zip Code 89117-6624

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
790.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03431**

Amount of Each Receipt this Period  
750.00

Full Name (Last, First, Middle Initial)  
**C. MR. KEITH G. KRAMER**

Mailing Address 18459 NW 9TH STREET

City PEMBROKE PINES      State FL      Zip Code 33029-3602

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED      Occupation REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03432**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1120.00

**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 1249 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. VANCE M. KRAMER JR.</b>		Date of Receipt
Mailing Address 100 NORTH STREET P.O. BOX 668		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City MCCOMB	State OH	Zip Code 45858
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI03433</b>
Name of Employer CRUSHPROOF TUBING COMPANY		Amount of Each Receipt this Period
Occupation PRESIDENT		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. WILLIAM A. KRAMER</b>		Date of Receipt
Mailing Address 2626 HOWELL STREET FLOOR 10		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City DALLAS	State TX	Zip Code 75204-4064
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI03434</b>
Name of Employer REPUBLIC TITILE OF TEXAS, INC.		Amount of Each Receipt this Period
Occupation ATTORNEY		<input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="2000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. TED KRAMPF JR.</b>		Date of Receipt
Mailing Address 452 S. LAHOMA AVENUE		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City NORMAN	State OK	Zip Code 73069-5524
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI03435</b>
Name of Employer REQUESTED		Amount of Each Receipt this Period
Occupation REQUESTED		<input type="text" value="300.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="300.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1550.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1250 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JAMES KRANTZ**

Mailing Address 9 ROCK HILL

City State Zip Code  
GLEN HEAD NY 11545-3149

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
YORK INTERNATIONAL AGENCY INSURANCE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI03436**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. MR. CHARLES FREDERICK KRAUSE**

Mailing Address 4020 LAVISTA CIRCLE  
APARTMENT 213

City State Zip Code  
JACKSONVILLE FL 32217-4348

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03437**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**C. MRS. DOROTHY KREICK**

Mailing Address 920 N. 68TH STREET

City State Zip Code  
LINCOLN NE 68505-2221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03438**

Amount of Each Receipt this Period  
65.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 685.00

**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 1251 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DOROTHY KREICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 920 N. 68TH STREET  
 City LINCOLN State NE Zip Code 68505-2221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03439**  
 Amount of Each Receipt this Period 65.00

**B. MR. GREG KREIMEYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 960 AUGUSTINE AVENUE  
 City COOS BAY State OR Zip Code 97420-3011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTOR/FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03440**  
 Amount of Each Receipt this Period 250.00

**C. MR. ALFRED L. KREPS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7666 CAPEL PT.  
 City PEYTON State CO Zip Code 80831-6140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI03441**  
 Amount of Each Receipt this Period 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	435.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1252 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALFRED L. KREPS**  
Full Name (Last, First, Middle Initial)

Mailing Address 7666 CAPEL PT.

City PEYTON	State CO	Zip Code 80831-6140
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2014

**Transaction ID : 2014M04L11AI03442**

Amount of Each Receipt this Period  
40.00

**B. MR. ALFRED L. KREPS**  
Full Name (Last, First, Middle Initial)

Mailing Address 7666 CAPEL PT.

City PEYTON	State CO	Zip Code 80831-6140
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI03443**

Amount of Each Receipt this Period  
41.00

**C. RITA KRESS**  
Full Name (Last, First, Middle Initial)

Mailing Address 227 W. ILLINOIS STREET

City BRIMFIELD	State IL	Zip Code 61517-8069
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer KRESS CORPORATION	Occupation BUSINESS OWNER
---------------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2014

**Transaction ID : 2014M04L11AI03444**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	331.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1253 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. BRUCE E. KRESSLER**

Mailing Address 16974 SCANDIA COURT N.W.

City State Zip Code  
POULSBO WA 98370-7050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03445**

Amount of Each Receipt this Period  
275.00

Full Name (Last, First, Middle Initial)  
**B. MRS. SHEILAH KREYENHAGEN**

Mailing Address 1001 FOLSOM STREET

City State Zip Code  
COALINGA CA 93210-1327

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

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  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03446**

Amount of Each Receipt this Period  
750.00

Full Name (Last, First, Middle Initial)  
**C. MR. GUY KRIEG**

Mailing Address P.O. BOX 408

City State Zip Code  
FARGO ND 58107-0408

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03447**

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1150.00

**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 1254 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GUY KRIEG**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 408

City FARGO State ND Zip Code 58107-0408

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03448**

Amount of Each Receipt this Period  
 125.00

**B. MR. GUY KRIEG**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 408

City FARGO State ND Zip Code 58107-0408

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03449**

Amount of Each Receipt this Period  
 126.00

**C. DR. BARRY ALAN KRIEGSFELD**  
Full Name (Last, First, Middle Initial)

Mailing Address 510 W. KALER DRIVE

City PHOENIX State AZ Zip Code 85021-7245

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03450**

Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	451.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1255 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. BARRY ALAN KRIEGSFELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 510 W. KALER DRIVE  
 City PHOENIX State AZ Zip Code 85021-7245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03451**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. MARK KRINGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8356 153RD PLACE  
 City SAVAGE State MN Zip Code 55378-2388  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CONSOLIDATED PRECISION PRODUCTS Occupation VICE PRESIDENT - OPERATIONS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 761.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03452**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. LOUIS KRISER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 46905 GRISSOM STREET  
 City POTOMAC FALLS State VA Zip Code 20165-3577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03453**  
 Amount of Each Receipt this Period  
 130.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	431.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1256 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT E. KROESSER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3547 SIR WILFRED PL

City VIRGINIA BEACH State VA Zip Code 23452-4644

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **316.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2014**

**Transaction ID : 2014M04L11AI03454**

Amount of Each Receipt this Period  
**25.00**

**B. MR. ROBERT E. KROESSER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3547 SIR WILFRED PL

City VIRGINIA BEACH State VA Zip Code 23452-4644

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **316.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 10 / 2014**

**Transaction ID : 2014M04L11AI03455**

Amount of Each Receipt this Period  
**40.00**

**C. MR. ROBERT E. KROESSER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3547 SIR WILFRED PL

City VIRGINIA BEACH State VA Zip Code 23452-4644

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **316.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : 2014M04L11AI03456**

Amount of Each Receipt this Period  
**50.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>115.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1257 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT E. KROESSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3547 SIR WILFRED PL  
 City VIRGINIA BEACH State VA Zip Code 23452-4644  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 316.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03457**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. ROBERT E. KROESSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3547 SIR WILFRED PL  
 City VIRGINIA BEACH State VA Zip Code 23452-4644  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 316.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03458**  
 Amount of Each Receipt this Period  
 40.00

**C. MR. JOHN A. KROL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4851 BONITA BAY BLVD PH101  
 PENTHOUSE 101  
 City BONITA SPRINGS State FL Zip Code 34134-3618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation BUSINESS EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03459**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1041.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1258 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JACK L. KROUT**  
Full Name (Last, First, Middle Initial)

Mailing Address 3234 SKILLMAN LANE

City	State	Zip Code
PETALUMA	CA	94952-8020

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03460**

Amount of Each Receipt this Period  
 100.00

**B. MR. JACK L. KROUT**  
Full Name (Last, First, Middle Initial)

Mailing Address 3234 SKILLMAN LANE

City	State	Zip Code
PETALUMA	CA	94952-8020

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03461**

Amount of Each Receipt this Period  
 50.00

**C. MR. LARRY J. KRUEGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 12407 MAXIM DRIVE

City	State	Zip Code
HOUSTON	TX	77065-2414

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
MUSTANG ENGINEERING	MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
526.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03462**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1259 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LARRY J. KRUEGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12407 MAXIM DRIVE  
 City HOUSTON State TX Zip Code 77065-2414  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MUSTANG ENGINEERING Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03463**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. LARRY J. KRUEGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12407 MAXIM DRIVE  
 City HOUSTON State TX Zip Code 77065-2414  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MUSTANG ENGINEERING Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 526.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03464**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. WELDON D. KRUGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9315 WHITNEY LANE  
 City COLLEGE STATION State TX Zip Code 77845-8384  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03465**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 651.00  
**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 1260 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JUANITA N. KRUPAR**  
Full Name (Last, First, Middle Initial)

Mailing Address 38609 MONET DRIVE

City ZEPHYRHILLS State FL Zip Code 33540-6576

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03466**

Amount of Each Receipt this Period  
 51.00

**B. MRS. JUANITA N. KRUPAR**  
Full Name (Last, First, Middle Initial)

Mailing Address 38609 MONET DRIVE

City ZEPHYRHILLS State FL Zip Code 33540-6576

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03467**

Amount of Each Receipt this Period  
 35.00

**C. MR. JERRY M. KRUSZKA**  
Full Name (Last, First, Middle Initial)

Mailing Address 29 W. OAK DRIVE

City HOUSTON State TX Zip Code 77056-2117

FEC ID number of contributing federal political committee. **C**

Name of Employer W.E.A. Occupation EXECUTVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03468**

Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 236.00

**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 1261 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENNETH KUBINSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11601 N.E. 150TH PLACE  
 City State Zip Code  
 KIRKLAND WA 98034-4627  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INSURANCE PROJECT MANAGER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03469**  
 Amount of Each Receipt this Period  
 205.00

**B. MRS. BETTY M. KUCHEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10108 EMPYREAN WAY  
 APARTMENT 202  
 City State Zip Code  
 LOS ANGELES CA 90067-3811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03470**  
 Amount of Each Receipt this Period  
 51.00

**C. MR. KARL KUDICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N7755 LAURA LANE  
 City State Zip Code  
 ELKHORN WI 53121-2772  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03471**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 756.00  
**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 1262 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. LANNY N. KUEHL</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 14 / 2014 <b>Transaction ID : 2014M04L11AI03472</b>
Mailing Address P.O. BOX 549		Amount of Each Receipt this Period 120.00
City GARNAVILLO	State IA	Zip Code 52049-0549
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.00	

Full Name (Last, First, Middle Initial) <b>B. MR. LANNY N. KUEHL</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI03473</b>
Mailing Address P.O. BOX 549		Amount of Each Receipt this Period 20.00
City GARNAVILLO	State IA	Zip Code 52049-0549
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.00	

Full Name (Last, First, Middle Initial) <b>C. MR. LANNY N. KUEHL</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI03474</b>
Mailing Address P.O. BOX 549		Amount of Each Receipt this Period 1.00
City GARNAVILLO	State IA	Zip Code 52049-0549
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	141.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1263 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARTHA KUKULKA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 721 S. MALONEY DRIVE  
 City NORTH PLATTE State NE Zip Code 69101-8922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **215.00**

Date of Receipt: **03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI03475**  
 Amount of Each Receipt this Period: **215.00**

**B. MR. ROBERT A. KULASON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1250 CLAYS TRAIL  
 City OLDSMAR State FL Zip Code 34677-4865  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **210.00**

Date of Receipt: **03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI03476**  
 Amount of Each Receipt this Period: **100.00**

**C. MR. DAVID KULCHINSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 622  
 City NOWATA State OK Zip Code 74048-0622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **MANAGER** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **205.00**

Date of Receipt: **03 / 26 / 2014**  
**Transaction ID : 2014M04L11AI03477**  
 Amount of Each Receipt this Period: **105.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **420.00**  
**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 1264 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. LARRY KULIK</b>		Date of Receipt
Mailing Address <b>W3768 S. SHORE DRIVE</b>		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
<b>LAKE GENEVA</b>	<b>WI</b>	<b>53147-3433</b>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI03478</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
<b>REQUESTED</b>	<b>REQUESTED</b>	<input type="text" value="120.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. CHARLES H. KULP</b>		Date of Receipt
Mailing Address <b>429 WILD OAK CIRCLE</b>		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
<b>LONGWOOD</b>	<b>FL</b>	<b>32779-3357</b>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI03479</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
<b>SELF-EMPLOYED</b>	<b>H.V.A.C. CONTRACTOR</b>	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MRS. VIJAYA KUMARI</b>		Date of Receipt
Mailing Address <b>2260 BARNBRIDGE ROAD</b>		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
<b>SAINT LOUIS</b>	<b>MO</b>	<b>63131-3130</b>
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI03480</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
<b>SELF-EMPLOYED</b>	<b>PHYSICIAN</b>	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="870.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 1265 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. JANIS GORBY KUMMER</b>		Date of Receipt										
Mailing Address 225 S. ANITA AVENUE		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>25</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		25		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03		25		2014								
City State Zip Code LOS ANGELES CA 90049-3837		<b>Transaction ID : 2014M04L11AI03481</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>501.00</b>										
Name of Employer RETIRED	Occupation RETIRED											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>501.00</b>											

Full Name (Last, First, Middle Initial) <b>B. MRS. BARARA KUNATH</b>		Date of Receipt										
Mailing Address 17820 TOIYABE STREET		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>18</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		18		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03		18		2014								
City State Zip Code SANTA ANA CA 92708-5139		<b>Transaction ID : 2014M04L11AI03482</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>110.00</b>										
Name of Employer REQUESTED	Occupation REQUESTED											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>220.00</b>											

Full Name (Last, First, Middle Initial) <b>C. MS. DONA KUNAU</b>		Date of Receipt										
Mailing Address 1941 MILLER AVENUE		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		26		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03		26		2014								
City State Zip Code BURLEY ID 83318-2342		<b>Transaction ID : 2014M04L11AI03483</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>29.00</b>										
Name of Employer RETIRED	Occupation RETIRED											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>329.00</b>											

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>640.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1266 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. ANNIE KUNAY</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 12 / 2014 <b>Transaction ID : 2014M04L11AI03484</b>
Mailing Address 7100 W. CHESTER PIKE APARTMENT 204		Amount of Each Receipt this Period 75.00
City UPPER DARBY	State PA	
Zip Code 19082-2221		Aggregate Year-to-Date ▼ 235.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. ROBERT P. KUNIEWICZ</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI03485</b>
Mailing Address 614 WAYNE AVENUE		Amount of Each Receipt this Period 65.00
City HADDONFIELD	State NJ	
Zip Code 08033-1008		Aggregate Year-to-Date ▼ 215.00
FEC ID number of contributing federal political committee. C		
Name of Employer UNIVERSITY OF PENN	Occupation BIOLOGIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. ROBERT P. KUNIEWICZ</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI03486</b>
Mailing Address 614 WAYNE AVENUE		Amount of Each Receipt this Period 50.00
City HADDONFIELD	State NJ	
Zip Code 08033-1008		Aggregate Year-to-Date ▼ 215.00
FEC ID number of contributing federal political committee. C		
Name of Employer UNIVERSITY OF PENN	Occupation BIOLOGIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	190.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1267 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. KATHLEEN S. KUNISH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 384 KENT ROAD  
 City RIVERSIDE State IL Zip Code 60546-1712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CO-OWNER/C.F.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03487**  
 Amount of Each Receipt this Period  
 220.00

**B. MR. WILLIAM C. KUNKLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 515  
 City BOCA GRANDE State FL Zip Code 33921-0515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03488**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. WILLIAM C. KUNKLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 515  
 City BOCA GRANDE State FL Zip Code 33921-0515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03489**  
 Amount of Each Receipt this Period  
 201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	621.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1268 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SANDEEP KUNWAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 QUAIL MEADOW DRIVE  
 City State Zip Code  
 WOODSIDE CA 94062-2499  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 WASHINGTON TOWNSHIP MEDICAL FDN. PHYSICIAN  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03490**  
 Amount of Each Receipt this Period  
 250.00

**B. MS. MARGARET R. KUPHALDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 358  
 City State Zip Code  
 SUTTON AK 99674-0358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03491**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. CHARLES W. KURTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3208 FORESTBROOK DRIVE  
 City State Zip Code  
 RICHARDSON TX 75082-2690  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 217.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03492**  
 Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	610.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1269 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES W. KURTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3208 FORESTBROOK DRIVE  
 City RICHARDSON State TX Zip Code 75082-2690  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03493**  
 Amount of Each Receipt this Period 52.00

**B. MRS. MADELYN L. KUSKA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 N. 162ND STREET  
 City LINCOLN State NE Zip Code 68527-1803  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VOLUNTEER Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03494**  
 Amount of Each Receipt this Period 50.00

**C. MR. ALAN L. KUYKENDALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 111 CREEKSIDE CIRCLE  
 City WILSONVILLE State AL Zip Code 35186-8617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LIBERTY BAPTIST CHURCH Occupation PASTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03495**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 202.00  
**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 1270 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RUDOLPH W. KUZMICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 8207  
 City MIDLAND State TX Zip Code 79708-8207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03496**  
 Amount of Each Receipt this Period  
 600.00

**B. MR. CHARLES WILLIAM KYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3000 S.W. MAWRCREST AVENUE  
 City GRESHAM State OR Zip Code 97080-8505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03497**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. FLORENCE E. LA DIEU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7767 CHAPARRAL WAY  
 City FAIR OAKS State CA Zip Code 95628-3402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03498**  
 Amount of Each Receipt this Period  
 275.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	975.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1271 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. FLORENCE E. LA DIEU</b>		Date of Receipt
Mailing Address 7767 CHAPARRAL WAY		M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014
City	State	Zip Code
FAIR OAKS	CA	95628-3402
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03499</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	325.00	

Full Name (Last, First, Middle Initial) <b>B. MR. KENNETH LA GRANDE</b>		Date of Receipt
Mailing Address 4312 BELLAIRE DR S APT 128		M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2014
City	State	Zip Code
FORT WORTH	TX	76109-5144
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03500</b>
Name of Employer SELF-EMPLOYED		Amount of Each Receipt this Period
Occupation FARMER		330.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	330.00	

Full Name (Last, First, Middle Initial) <b>C. MR. C. STUART LADOW</b>		Date of Receipt
Mailing Address 4211 LATOUR COURT		M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014
City	State	Zip Code
ALLISON PARK	PA	15101-2968
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03501</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	280.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	430.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1272 OF 2949
	<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. C. STUART LADOW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4211 LATOUR COURT  
 City ALLISON PARK State PA Zip Code 15101-2968  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03502**  
 Amount of Each Receipt this Period 30.00

**B. MS. RENEE LADUKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2710 MANOR AVENUE  
 City MOUNT PLEASANT State WI Zip Code 53406-1922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03503**  
 Amount of Each Receipt this Period 100.00

**C. MR. RICHARD AUTHER LAFOND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 38 FIELDSTONE COURT  
 City NORTH HAVEN State CT Zip Code 06473-2892  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03504**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 630.00  
**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 1273 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SUSAN WHITE LAFORGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 120 MILES AVENUE

City VALLEY CENTER	State KS	Zip Code 67147-2037
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03505**

Amount of Each Receipt this Period  
 120.00

**B. MS. PAULINE LARUE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6141 BANYAN CIRCLE

City ORANGE PARK	State FL	Zip Code 32003-8164
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03506**

Amount of Each Receipt this Period  
 91.00

**C. MR. GUY A. LABOA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 57 MOUNTAIN TRACE POINTE

City DAHLONEGA	State GA	Zip Code 30533-7105
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03507**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	311.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1274 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD T. LABORDE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2926 SAINT CHARLES AVENUE  
 City NEW ORLEANS State LA Zip Code 70115-4422  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03508**  
 Amount of Each Receipt this Period  
 152.00

**B. MRS. JOANN LACY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1277  
 City ZEBULON State GA Zip Code 30295-1277  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03509**  
 Amount of Each Receipt this Period  
 500.00

**C. GLEN LADAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7284 W PALMETTO PARK RD  
 City BOCA RATON State FL Zip Code 33433-3406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03510**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	762.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1275 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KATHERINE Y. LAFLEUR**  
Full Name (Last, First, Middle Initial)

Mailing Address 1604 S. BURNSIDE AVENUE #103

City GONZALES State LA Zip Code 70737-4445

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03511**

Amount of Each Receipt this Period  
 100.00

**B. MR. WILLIAM LAFORCE**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 353

City MIDLAND State TX Zip Code 79702-0353

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PETROLEUM ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03512**

Amount of Each Receipt this Period  
 220.00

**C. MR. THOMAS H. LAITY**  
Full Name (Last, First, Middle Initial)

Mailing Address 18506 POINT LOOKOUT DRIVE

City NASSAU BAY State TX Zip Code 77058-4027

FEC ID number of contributing federal political committee. **C**

Name of Employer VOLUNTEER Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03513**

Amount of Each Receipt this Period  
 15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 335.00

**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 1276 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. THOMAS H. LAITY</b>		Date of Receipt 03 / 11 / 2014 <b>Transaction ID : 2014M04L11AI03514</b>
Mailing Address 18506 POINT LOOKOUT DRIVE		Amount of Each Receipt this Period 15.00
City NASSAU BAY	State TX	Zip Code 77058-4027
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) <b>B. MR. THOMAS H. LAITY</b>		Date of Receipt 03 / 17 / 2014 <b>Transaction ID : 2014M04L11AI03515</b>
Mailing Address 18506 POINT LOOKOUT DRIVE		Amount of Each Receipt this Period 10.00
City NASSAU BAY	State TX	Zip Code 77058-4027
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) <b>C. MR. THOMAS H. LAITY</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI03516</b>
Mailing Address 18506 POINT LOOKOUT DRIVE		Amount of Each Receipt this Period 15.00
City NASSAU BAY	State TX	Zip Code 77058-4027
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1277 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS H. LAITY**  
Full Name (Last, First, Middle Initial)

Mailing Address 18506 POINT LOOKOUT DRIVE

City NASSAU BAY State TX Zip Code 77058-4027

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03517**

Amount of Each Receipt this Period  
 100.00

**B. MR. WALTER J. LAKE SR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 24 DOCKSIDE LANE

City KEY LARGO State FL Zip Code 33037-5267

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 740.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03518**

Amount of Each Receipt this Period  
 135.00

**C. MR. WALTER J. LAKE SR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 24 DOCKSIDE LANE

City KEY LARGO State FL Zip Code 33037-5267

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 740.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03519**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	245.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1278 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WALTER J. LAKE SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24 DOCKSIDE LANE  
 City KEY LARGO State FL Zip Code 33037-5267  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 740.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03520**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. DAVID LALUM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2602 N 14TH AVE APT 18  
 City TUCSON State AZ Zip Code 85705-0201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03521**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. STEVEN LAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10030 HILLCREST ROAD  
 City CUPERTINO State CA Zip Code 95014-1022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MARVELL SEMICONDUCTOR, INC. Occupation ELECTRICAL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03522**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**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 1279 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID R. LAMMERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 203 CARLTON DRIVE  
 City SPARTANBURG State SC Zip Code 29302-3206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03523**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. DAVID R. LAMMERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 203 CARLTON DRIVE  
 City SPARTANBURG State SC Zip Code 29302-3206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03524**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. DAVID R. LAMMERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 203 CARLTON DRIVE  
 City SPARTANBURG State SC Zip Code 29302-3206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03525**  
 Amount of Each Receipt this Period  
 50.00

**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: PAGE 1280 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID R. LAMMERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 203 CARLTON DRIVE  
 City State Zip Code  
 SPARTANBURG SC 29302-3206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03526**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. WILLIAM E. LAMON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1300 FAYETTE STREET  
 APARTMENT 158  
 City State Zip Code  
 CONSHOHOCKEN PA 19428-1359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03527**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. WILLIAM E. LAMON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1300 FAYETTE STREET  
 APARTMENT 158  
 City State Zip Code  
 CONSHOHOCKEN PA 19428-1359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI03528**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 251.00  
**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 1281 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES R. LANCASTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6314 E. AMBER SUN DRIVE  
 City State Zip Code  
 SCOTTSDALE AZ 85266-7220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03529**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. OLIN C. LANCASTER III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30 NEWSOME LANE  
 City State Zip Code  
 WILTON CT 06897-4229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 POLO RALPH LAUREN CORP. EXECUTIVE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03530**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. JACK LANDERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17015 S. BROADWAY ST  
 City State Zip Code  
 GARDENA CA 90248-3113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N.E.C. ELECTRIC, INC. ELECTRICAL ESTIMATOR  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03531**  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00  
**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 1282 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARK HILLIARD LANDON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4637 BILTMORE DRIVE  
 City FRISCO State TX Zip Code 75034-6853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: SALTER LABS Occupation: MEDICAL PRODUCTS SALES  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI03532**  
 Amount of Each Receipt this Period: 251.00  
 Aggregate Year-to-Date: 251.00

**B. MR. PIERRE LANDRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1025 LANGLINAIS RD LOT 100  
 City YOUNGSVILLE State LA Zip Code 70592-6132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: RETIRED Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03533**  
 Amount of Each Receipt this Period: 500.00  
 Aggregate Year-to-Date: 500.00

**C. SGT. MAJ MORTON S. LANDY USMCR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 126  
 100 JACOB FRYER LANE  
 City MAHAFFEY State PA Zip Code 15757-0126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: RETIRED Occupation: RETIRED  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt: 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03534**  
 Amount of Each Receipt this Period: 200.00  
 Aggregate Year-to-Date: 610.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 951.00  
**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 1283 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES M. LANE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3700 S. OCEAN BLVD.  
 APARTMENT 1006  
 City HIGHLAND BEACH State FL Zip Code 33487-3371  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03535**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. JAMES M. LANE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3700 S. OCEAN BLVD.  
 APARTMENT 1006  
 City HIGHLAND BEACH State FL Zip Code 33487-3371  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03536**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. JOHN W. LANE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6304 TURNERS GAP ROAD  
 City BRADENTON State FL Zip Code 34203-8010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03537**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	420.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1284 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CATHERINE S. LANEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1773 BUFFALO SHOALS ROAD  
 City LINCOLNTON State NC Zip Code 28092-7203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1340.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03538**  
 Amount of Each Receipt this Period 100.00

**B. MS. CATHERINE S. LANEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1773 BUFFALO SHOALS ROAD  
 City LINCOLNTON State NC Zip Code 28092-7203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1340.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03539**  
 Amount of Each Receipt this Period 110.00

**C. MS. CATHERINE S. LANEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1773 BUFFALO SHOALS ROAD  
 City LINCOLNTON State NC Zip Code 28092-7203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1340.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03540**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 410.00  
**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 1285 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. CATHERINE S. LANEY</b>		Date of Receipt 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI03541</b>
Mailing Address 1773 BUFFALO SHOALS ROAD		Amount of Each Receipt this Period 200.00
City LINCOLNTON	State NC	Zip Code 28092-7203
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1340.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. VIRGINIA LANFRANKI</b>		Date of Receipt 03 / 07 / 2014 <b>Transaction ID : 2014M04L11AI03542</b>
Mailing Address 875 MADRONE LANE		Amount of Each Receipt this Period 50.00
City PATTERSON	State CA	Zip Code 95363-2633
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. VIRGINIA LANFRANKI</b>		Date of Receipt 03 / 12 / 2014 <b>Transaction ID : 2014M04L11AI03543</b>
Mailing Address 875 MADRONE LANE		Amount of Each Receipt this Period 50.00
City PATTERSON	State CA	Zip Code 95363-2633
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1286 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. VIRGINIA LANFRANKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 875 MADRONE LANE  
 City Patterson State CA Zip Code 95363-2633  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 456.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03544**  
 Amount of Each Receipt this Period 1.00

**B. MR. RONALD A. LANG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8449 THIRD LANE  
 City Marathon State WI Zip Code 54448-9522  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 281.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03545**  
 Amount of Each Receipt this Period 51.00

**C. MR. GENE A. LANGENBACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6640 BRIDLEWOOD WAY  
 City Suwanee State GA Zip Code 30024-5413  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03546**  
 Amount of Each Receipt this Period 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	152.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1287 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GENE A. LANGENBACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6640 BRIDLEWOOD WAY  
 City SUWANEE State GA Zip Code 30024-5413  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03547**  
 Amount of Each Receipt this Period  
 120.00

**B. MRS. GRADY H. LANGFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 284  
 City WEST State TX Zip Code 76691-0284  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03548**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. STEPHEN LANKHEIT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 128  
 City CHARLESTON State MO Zip Code 63834-0128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03549**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 371.00  
**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 1288 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. TANIA F. LAPCIUC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1753 NORTH VIEW DRIVE  
 City State Zip Code  
 MIAMI BEACH FL 33140-4253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PRECISION TRADING SECRETARY  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03550**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. WILLIAM L. LARRABEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 220 CANNA LANE  
 City State Zip Code  
 LIBERAL KS 67901-4900  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03551**  
 Amount of Each Receipt this Period  
 202.00

**C. MR. DONALD ERNST LARSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 LONGMEADOW DRIVE  
 City State Zip Code  
 BARRINGTON IL 60010-9364  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03552**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 952.00  
**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 1289 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. NEAL J. LARSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4328 1ST PLACE  
 City KENOSHA State WI Zip Code 53144-1006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PRODUCTION FOREMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03553**  
 Amount of Each Receipt this Period  
 201.00

**B. MR. NEAL J. LARSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4328 1ST PLACE  
 City KENOSHA State WI Zip Code 53144-1006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PRODUCTION FOREMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03554**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. RICHARD LARSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 445 MAYAPPLE COURT  
 City ROCHESTER HILLS State MI Zip Code 48307-5228  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI03555**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	402.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1290 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD LARSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 445 MAYAPPLE COURT  
 City ROCHESTER HILLS State MI Zip Code 48307-5228  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI03556**  
 Amount of Each Receipt this Period  
 100.00

**B. A. E. LARSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1552 JESSE LANE  
 City GOLDEN State CO Zip Code 80403-8068  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI03557**  
 Amount of Each Receipt this Period  
 50.00

**C. A. E. LARSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1552 JESSE LANE  
 City GOLDEN State CO Zip Code 80403-8068  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03558**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1291 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BILL LARSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29940 COUNTY ROAD 4  
 City FOWLER State CO Zip Code 81039-9734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BEEF FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03559**  
 Amount of Each Receipt this Period  
 1000.00

**B. MS. CHRISTINA B. LARSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 346 LASALLE ROAD  
 City GOLETA State CA Zip Code 93117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03560**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. JOHN D. LARSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4403 S. 198 AVENUE  
 City OMAHA State NE Zip Code 68135-3788  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNIVERSITY OF NEBRASKA MEDICAL CENT Occupation MANAGER E.M.C.S.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03561**  
 Amount of Each Receipt this Period  
 220.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1720.00  
**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 1292 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LARRY LARSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 9841 HARNEY PARKWAY S.

City OMAHA	State NE	Zip Code 68114-4956
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : 2014M04L11AI03562**

Amount of Each Receipt this Period  
500.00

**B. MS. LOIS JAMES LARSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 13509 YORK AVENUE S.  
13509 YORK AVE. S.

City BURNSVILLE	State MN	Zip Code 55337-1844
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2014

**Transaction ID : 2014M04L11AI03563**

Amount of Each Receipt this Period  
200.00

**C. DR. MICHAEL A. LARY**  
Full Name (Last, First, Middle Initial)

Mailing Address 6 STONERIDGE DRIVE

City AMARILLO	State TX	Zip Code 79124-4825
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ARDENT/BSA HEALTH SYSTEM	Occupation PHYSICIAN
--	-------------------------

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
03	/	26	/	2014

**Transaction ID : 2014M04L11AI03564**

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1293 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. DONALD E. LASATER</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI03565</b>
Mailing Address 8 WOODBRIDGE MANOR ROAD		Amount of Each Receipt this Period 1.00
City SAINT LOUIS	State MO	Zip Code 63141-8236
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>B. MS. BETTY AREND LASH</b>		Date of Receipt 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI03566</b>
Mailing Address 2501 WESTERLAND DRIVE APARTMENT A101		Amount of Each Receipt this Period 105.00
City HOUSTON	State TX	Zip Code 77063-2245
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

Full Name (Last, First, Middle Initial) <b>C. MS. BETTY AREND LASH</b>		Date of Receipt 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI03567</b>
Mailing Address 2501 WESTERLAND DRIVE APARTMENT A101		Amount of Each Receipt this Period 100.00
City HOUSTON	State TX	Zip Code 77063-2245
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	206.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1294 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. JAMES DAVANT LATHAM</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 05 / 2014 <b>Transaction ID : 2014M04L11AI03568</b>
Mailing Address 6284 MASSEY OAKS COVE		Amount of Each Receipt this Period 120.00
City MEMPHIS	State TN	Zip Code 38120-4207
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>B. MR. JAMES DAVANT LATHAM</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI03569</b>
Mailing Address 6284 MASSEY OAKS COVE		Amount of Each Receipt this Period 100.00
City MEMPHIS	State TN	Zip Code 38120-4207
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>C. MR. ROBERT LAUDERDALE</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI03570</b>
Mailing Address 2 CROWN PLACE		Amount of Each Receipt this Period 101.00
City RICHARDSON	State TX	Zip Code 75080-1603
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	321.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1295 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JEANNE LAUDICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 436 HERON COVE  
 City FORT COLLINS State CO Zip Code 80524-8601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03571**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. HAROLD LAUGHLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1325 JEFFERSON AVENUE  
 City DOWNERS GROVE State IL Zip Code 60516-1214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03572**  
 Amount of Each Receipt this Period  
 300.00

**C. MS. SANDY LAUGHLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 769  
 City PEBBLE BEACH State CA Zip Code 93953-0769  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI03573**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1296 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. COL. RAMON M. LAUGHTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8225 FARM 149 ROAD  
 City MONTGOMERY State TX Zip Code 77316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03574**  
 Amount of Each Receipt this Period 250.00

**B. MR. ROLAND EDWARD LAUNIUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 OLYMPIA DRIVE APARTMENT 407  
 City MAUMELLE State AR Zip Code 72113-7181  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03575**  
 Amount of Each Receipt this Period 60.00

**C. MR. ROLAND EDWARD LAUNIUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 OLYMPIA DRIVE APARTMENT 407  
 City MAUMELLE State AR Zip Code 72113-7181  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03576**  
 Amount of Each Receipt this Period 60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 370.00  
**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 1297 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROLAND EDWARD LAUNIUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 OLYMPIA DRIVE  
 APARTMENT 407  
 City MAUMELLE State AR Zip Code 72113-7181  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03577**  
 Amount of Each Receipt this Period 61.00

**B. MS. CHRISTINE LAURIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12 HIAWATHA RD  
 City BABYLON State NY Zip Code 11702-4410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BUTTERFLY ENERGY Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI03578**  
 Amount of Each Receipt this Period 300.00

**C. MR. DAN LAURSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7678 MADISON ROAD  
 City ALLIANCE State NE Zip Code 69301-5085  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03579**  
 Amount of Each Receipt this Period 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 481.00  
**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 1298 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS LAVELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 3676 DUELLANT ROAD

City LOXAHATCHEE State FL Zip Code 33470-2405

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03580**

Amount of Each Receipt this Period  
 500.00

**B. MS. BEATRICE A. LAW**  
Full Name (Last, First, Middle Initial)

Mailing Address 1526 CASTLE DRIVE

City PETOSKEY State MI Zip Code 49770-8781

FEC ID number of contributing federal political committee. **C**

Name of Employer L. T. B. B. Occupation TRIBAL COUNSELOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03581**

Amount of Each Receipt this Period  
 135.00

**C. MR. BRUCE W. LAW**  
Full Name (Last, First, Middle Initial)

Mailing Address 227 LAGOON BEACH DRIVE

City BAY CITY State MI Zip Code 48706-1436

FEC ID number of contributing federal political committee. **C**

Name of Employer MAGLINE INC. Occupation BUSINESS MANAGER

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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03582**

Amount of Each Receipt this Period  
 750.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1385.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1299 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RUSSELL EUGENE LAWHORN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3321 BREAUX DRIVE  
 City LOUISVILLE State KY Zip Code 40220-2178  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03583**  
 Amount of Each Receipt this Period  
 125.00

**B. MR. RUSSELL EUGENE LAWHORN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3321 BREAUX DRIVE  
 City LOUISVILLE State KY Zip Code 40220-2178  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03584**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. BYRON H. LAWRENCE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 426 SPNER AVE.  
 City LANCASTER State PA Zip Code 17603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03585**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 176.00  
**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 1300 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. BYRON H. LAWRENCE</b>		Date of Receipt
Mailing Address 426 SPNER AVE.		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
LANCASTER	PA	17603
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI03586</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
N/A	RETIRED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. FLOYD LAWRENCE</b>		Date of Receipt
Mailing Address 1700 EDWARDS AVENUE		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
MUSCLE SHOALS	AL	35661-1912
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI03587</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="101.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="201.00"/>	

Full Name (Last, First, Middle Initial) <b>C. JOANNE LAWRENCE</b>		Date of Receipt
Mailing Address 4949 RIDGEWOOD		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
RICHLAND	MI	49083-9401
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI03588</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="401.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="401.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="552.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1301 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ANITA S. LAWSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 808 FAIRWAY DR  
 City FAYETTEVILLE State TN Zip Code 37334-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FIRST NATIONAL BANK Occupation BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03589**  
 Amount of Each Receipt this Period  
 220.00

**B. DR. EDGAR C. LAWSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 108 HOLLY COURT  
 City CHARLOTTESVILLE State VA Zip Code 22901-3150  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03590**  
 Amount of Each Receipt this Period  
 525.00

**C. MR. H. D. LAWSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 794  
 City EMPIRE State CA Zip Code 95319-0794  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03591**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 795.00  
**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 1302 OF 2949
	<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	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. H. D. LAWSON**

Mailing Address P.O. BOX 794

City State Zip Code  
EMPIRE CA 95319-0794

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03592**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**B. MR. HERMAN LAWSON**

Mailing Address BOX 931

City State Zip Code  
MANSFIELD LA 71052-0931

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03593**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. GEN. RICHARD L. LAWSON**

Mailing Address 6910 CLFTON ROAD

City State Zip Code  
CLIFTON VA 20124-1524

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03594**

Amount of Each Receipt this Period  
51.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5171.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1303 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. GEN. RICHARD L. LAWSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6910 CLFTON ROAD  
 City CLIFTON State VA Zip Code 20124-1524  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03595**  
 Amount of Each Receipt this Period 100.00

**B. MR. CARL E. LAWYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1423 4TH STREET  
 City MARYSVILLE State WA Zip Code 98270-5036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PACIFIC GRINDING WHEEL COMPANY Occupation MANUFACTURING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03596**  
 Amount of Each Receipt this Period 100.00

**C. JIMMIE LAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1905 KENNETH STREET  
 City FULTONDALE State AL Zip Code 35068-1056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BAIL BONDSMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03597**  
 Amount of Each Receipt this Period 50.00

**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 1304 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. HUONG LE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9278 ADELPHI RD #301  
 APARTMENT 301  
 City HYATTSVILLE State MD Zip Code 20783-2031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MEDSTAR WASHINGTON HOSPITAL CENTER Occupation NURSE  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **651.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03598**  
 Amount of Each Receipt this Period  
**120.00**

**B. MRS. HUONG LE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9278 ADELPHI RD #301  
 APARTMENT 301  
 City HYATTSVILLE State MD Zip Code 20783-2031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MEDSTAR WASHINGTON HOSPITAL CENTER Occupation NURSE  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **651.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03599**  
 Amount of Each Receipt this Period  
**100.00**

**C. MRS. HUONG LE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9278 ADELPHI RD #301  
 APARTMENT 301  
 City HYATTSVILLE State MD Zip Code 20783-2031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MEDSTAR WASHINGTON HOSPITAL CENTER Occupation NURSE  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **651.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03600**  
 Amount of Each Receipt this Period  
**60.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>280.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1305 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. HUONG LE</b>		Date of Receipt
Mailing Address 9278 ADELPHI RD #301 APARTMENT 301		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
HYATTSVILLE	MD	20783-2031
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI03601</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1.00"/>
Name of Employer	Occupation	
MEDSTAR WASHINGTON HOSPITAL CENTER	NURSE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="651.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MRS. HUONG LE</b>		Date of Receipt
Mailing Address 9278 ADELPHI RD #301 APARTMENT 301		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
HYATTSVILLE	MD	20783-2031
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI03602</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
MEDSTAR WASHINGTON HOSPITAL CENTER	NURSE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="651.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. JOSEPH LEBLANC</b>		Date of Receipt
Mailing Address 1367 PARKSHORE DRIVE		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
CHARLESTON	SC	29407-3123
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI03603</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="695.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="695.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="796.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 1306 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JANIE R. LEROY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8973 KINGS HILL DRIVE  
 City COTTONWOOD HEIGHTS State UT Zip Code 84121-6181  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03604**  
 Amount of Each Receipt this Period  
 136.00

**B. MRS. ALICE LEACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 70126  
 City VANCOUVER State WA Zip Code 98665-0037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03605**  
 Amount of Each Receipt this Period  
 120.00

**C. MRS. ALICE LEACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 70126  
 City VANCOUVER State WA Zip Code 98665-0037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03606**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	356.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1308 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HOWARD E. LEACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2847 RANCHERO DRIVE  
 City LAKE HAVASU CITY State AZ Zip Code 86406-6916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03610**  
 Amount of Each Receipt this Period 330.00

**B. DR. KYE LEAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4106 87TH STREET  
 City LUBBOCK State TX Zip Code 79423-2920  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 341.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03611**  
 Amount of Each Receipt this Period 121.00

**C. MR. HAROLD W. LEAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 READING DRIVE APARTMENT 304  
 City WERNERSVILLE State PA Zip Code 19565-2024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03612**  
 Amount of Each Receipt this Period 70.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 521.00  
**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 1309 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HAROLD W. LEAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 READING DRIVE  
 APARTMENT 304  
 City WERNERSVILLE State PA Zip Code 19565-2024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03613**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. JOHN LEATHERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1165 5TH AVENUE  
 APARTMENT 11B  
 City NEW YORK State NY Zip Code 10029-6931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MORGAN STANLEY Occupation FINANCIAL ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03614**  
 Amount of Each Receipt this Period  
 135.00

**C. MR. JOHN LEATHERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1165 5TH AVENUE  
 APARTMENT 11B  
 City NEW YORK State NY Zip Code 10029-6931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MORGAN STANLEY Occupation FINANCIAL ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03615**  
 Amount of Each Receipt this Period  
 135.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 370.00  
**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 1310 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. J. LINK LEAVENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1087 WEST RIDGE DRIVE  
 City VENTURA State CA Zip Code 93003-1458  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03616**  
 Amount of Each Receipt this Period  
 101.00

**B. MR. DONALD LEAVENWORTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 543 HARRINGTON ROAD  
 City WAYZATA State MN Zip Code 55391-1512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03617**  
 Amount of Each Receipt this Period  
 100.00

**C. LT. GEN. LLOYD R. LEAVITT U.S.A.F.R.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 FALLS VIEW  
 City BOERNE State TX Zip Code 78015-4483  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03618**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	302.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1311 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. LT. GEN. LLOYD R. LEAVITT U.S.A.F.R.</b>			Date of Receipt
Mailing Address 7 FALLS VIEW			<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : 2014M04L11AI03619</b>
BOERNE	TX	78015-4483	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="250.00"/>
Name of Employer	Occupation		
RETIRED	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="351.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. MS. MARILYN E. LEBAN</b>			Date of Receipt
Mailing Address 7701 N. KENDALL DRIVE APARTMENT B224			<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : 2014M04L11AI03620</b>
MIAMI	FL	33156-7594	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="120.00"/>
Name of Employer	Occupation		
REQUESTED	REQUESTED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="370.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. MS. MARILYN E. LEBAN</b>			Date of Receipt
Mailing Address 7701 N. KENDALL DRIVE APARTMENT B224			<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : 2014M04L11AI03621</b>
MIAMI	FL	33156-7594	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="250.00"/>
Name of Employer	Occupation		
REQUESTED	REQUESTED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="370.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="620.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 1312 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ALICE O. LEBEWOHL**

Full Name (Last, First, Middle Initial)  
MRS. ALICE O. LEBEWOHL

Mailing Address 5500 CALLE REAL  
APARTMENT 129

City SANTA BARBARA State CA Zip Code 93111-1692

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1900.00

Date of Receipt  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03622**

Amount of Each Receipt this Period  
100.00

**B. MRS. ALICE O. LEBEWOHL**

Full Name (Last, First, Middle Initial)  
MRS. ALICE O. LEBEWOHL

Mailing Address 5500 CALLE REAL  
APARTMENT 129

City SANTA BARBARA State CA Zip Code 93111-1692

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1900.00

Date of Receipt  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03623**

Amount of Each Receipt this Period  
200.00

**C. MRS. ALICE O. LEBEWOHL**

Full Name (Last, First, Middle Initial)  
MRS. ALICE O. LEBEWOHL

Mailing Address 5500 CALLE REAL  
APARTMENT 129

City SANTA BARBARA State CA Zip Code 93111-1692

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1900.00

Date of Receipt  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03624**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1313 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WAYNE LEBSACK**  
Full Name (Last, First, Middle Initial)

Mailing Address 603 S. DOUGLAS AVENUE

City LYONS State KS Zip Code 67554-3202

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation GEOLOGIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **910.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**

**Transaction ID : 2014M04L11AI03625**

Amount of Each Receipt this Period  
**50.00**

**B. MR. WAYNE LEBSACK**  
Full Name (Last, First, Middle Initial)

Mailing Address 603 S. DOUGLAS AVENUE

City LYONS State KS Zip Code 67554-3202

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation GEOLOGIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **910.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 26 / 2014**

**Transaction ID : 2014M04L11AI03625**

Amount of Each Receipt this Period  
**50.00**

**C. MS. RAGINA LECLERC**  
Full Name (Last, First, Middle Initial)

Mailing Address 9070 S.W. 80TH AVENUE  
ROOM 305

City OCALA State FL Zip Code 34481-6574

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **501.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : 2014M04L11AI03627**

Amount of Each Receipt this Period  
**501.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **601.00**

**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 1314 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. MARTIN LEDDY**

Mailing Address 9204 210TH STREET COURT E.

City State Zip Code  
GRAHAM WA 98338-8033

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
CITY OF FEDERAL WAY, W.A. POLICE LIEUTENANT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03628**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. ANTONIO IBANEZ LEE**

Mailing Address 10307 FLEMING AVENUE

City State Zip Code  
BETHESDA MD 20814-2162

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03629**

Amount of Each Receipt this Period  
275.00

Full Name (Last, First, Middle Initial)  
**C. MR. BILLY W. LEE**

Mailing Address 2671 MUM DRIVE

City State Zip Code  
RICHARDSON TX 75082-4251

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03630**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 575.00

**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 1315 OF 2949
	<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	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. BILLY W. LEE</b>		Date of Receipt
Mailing Address 2671 MUM DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 25 / 2014
City	State	Zip Code
RICHARDSON	TX	75082-4251
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03631
C		Amount of Each Receipt this Period
		1.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	201.00	

Full Name (Last, First, Middle Initial) <b>B. MR. CHENG SAN LEE</b>		Date of Receipt
Mailing Address 36 LYNWOOD ROAD		M M M / D D D / Y Y Y Y Y Y 03 / 25 / 2014
City	State	Zip Code
CEDAR GROVE	NJ	07009-1970
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03632
C		Amount of Each Receipt this Period
		150.00
Name of Employer	Occupation	
SELF-EMPLOYED	RESTAURANT MANAGER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	315.00	

Full Name (Last, First, Middle Initial) <b>C. MS. DEIDRE A. LEE</b>		Date of Receipt
Mailing Address 326 BROWNSTONE CIRCLE		M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014
City	State	Zip Code
GREENVILLE	SC	29615-6950
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03633
C		Amount of Each Receipt this Period
		50.00
Name of Employer	Occupation	
FLUOR	VICE PRESIDENT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	293.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1316 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD K. LEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1480 IHILOA LOOP  
 City HONOLULU State HI Zip Code 96821-1347  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03634**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. EDWARD K. LEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1480 IHILOA LOOP  
 City HONOLULU State HI Zip Code 96821-1347  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03635**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. EDWARD K. LEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1480 IHILOA LOOP  
 City HONOLULU State HI Zip Code 96821-1347  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03636**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1317 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ELEANOR D. LEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1930 W. RIVER BEND COURT  
 City MEQUON State WI Zip Code 53092-2925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03637**  
 Amount of Each Receipt this Period  
 200.00

**B. DR. GEORGE C. LEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1749 LAS PALMITAS STREET  
 City SOUTH PASADENA State CA Zip Code 91030-3530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03638**  
 Amount of Each Receipt this Period  
 300.00

**C. MS. HAZEL L. LEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1604 BILLING DRIVE  
 City TUSCALOOSA State AL Zip Code 35406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer M.D. Occupation OFFICE WORKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03639**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00  
**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 1318 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. HAZEL L. LEE**

Mailing Address 1604 BILLING DRIVE

City TUSCALOOSA      State AL      Zip Code 35406

FEC ID number of contributing federal political committee. **C**

Name of Employer: PHYSICIAN      Occupation: OFFICE WORKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03640**

Amount of Each Receipt this Period  
820.00

Full Name (Last, First, Middle Initial)  
**B. MR. JOHN LEE**

Mailing Address 3344 PEACHTREE ROAD NE  
UNIT 3504

City ATLANTA      State GA      Zip Code 30326-4805

FEC ID number of contributing federal political committee. **C**

Name of Employer: SELF-EMPLOYED      Occupation: INVESTMENT MANAGEMENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03641**

Amount of Each Receipt this Period  
750.00

Full Name (Last, First, Middle Initial)  
**C. MR. JOHN R. LEE**

Mailing Address 7264 HAGUE ROAD

City INDIANAPOLIS      State IN      Zip Code 46256-1926

FEC ID number of contributing federal political committee. **C**

Name of Employer: RETIRED      Occupation: RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03642**

Amount of Each Receipt this Period  
20.00

**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 1319 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN R. LEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7264 HAGUE ROAD  
 City INDIANAPOLIS State IN Zip Code 46256-1926  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03643**  
 Amount of Each Receipt this Period  
 21.00

**B. DR. RICHARD Y. LEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 214 2ND STREET SE  
 City WASHINGTON State DC Zip Code 20003-1943  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation DENTIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI03644**  
 Amount of Each Receipt this Period  
 150.00

**C. MS. SUYONN LEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 345 8TH AVENUE APARTMENT 17E  
 City NEW YORK State NY Zip Code 10001-4865  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03645**  
 Amount of Each Receipt this Period  
 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1320 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SUYONN LEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 345 8TH AVENUE  
 APARTMENT 17E  
 City NEW YORK State NY Zip Code 10001-4865  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03646**  
 Amount of Each Receipt this Period  
 30.00

**B. MS. SUYONN LEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 345 8TH AVENUE  
 APARTMENT 17E  
 City NEW YORK State NY Zip Code 10001-4865  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03647**  
 Amount of Each Receipt this Period  
 35.00

**C. MS. SUYONN LEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 345 8TH AVENUE  
 APARTMENT 17E  
 City NEW YORK State NY Zip Code 10001-4865  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03648**  
 Amount of Each Receipt this Period  
 31.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	96.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1321 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARILYN M. LEEDOM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1196 BLAKES WAY  
 City MENASHA State WI Zip Code 54952-1967  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 406.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03649**  
 Amount of Each Receipt this Period  
 135.00

**B. MRS. MARILYN M. LEEDOM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1196 BLAKES WAY  
 City MENASHA State WI Zip Code 54952-1967  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 406.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03650**  
 Amount of Each Receipt this Period  
 136.00

**C. MR. KEVIN R. LEEDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 BETSY LN  
 City WEBSTER CITY State IA Zip Code 50595-2701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MORTS PLUMBING AND HEATIN Occupation REFRIGERATION SERVICE TECH  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03651**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 371.00  
**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 1322 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. KEVIN R. LEEDS**

Mailing Address 1101 BETSY LN

City WEBSTER CITY State IA Zip Code 50595-2701

FEC ID number of contributing federal political committee. **C**

Name of Employer MORTS PLUMBING AND HEATIN Occupation REFRIGERATION SERVICE TECH

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  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI03652**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**B. MR. CARL B. LEEDY**

Mailing Address 5 GREENWAY PLAZA SUITE 110

City HOUSTON State TX Zip Code 77046-0526

FEC ID number of contributing federal political committee. **C**

Name of Employer OCCIDENTAL PETROLEUM CORP. Occupation CHEMICAL ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03653**

Amount of Each Receipt this Period  
 120.00

Full Name (Last, First, Middle Initial)  
**C. SAM LEEPER**

Mailing Address 36567 OCOTILLO CANYON DR

City TUCSON State AZ Zip Code 85739-2287

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03654**

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1220.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1323 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. BROOKE LEER**  
Full Name (Last, First, Middle Initial)

Mailing Address 5441 PRESERVE PKWY S.

City GREENWOOD VILLAGE State CO Zip Code 80121-2148

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI03655**

Amount of Each Receipt this Period  
 500.00

**B. MRS. JEAN A. LEFFLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1210 N. OLD MILL DRIVE

City DELTONA State FL Zip Code 32725-2861

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 683.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03656**

Amount of Each Receipt this Period  
 242.00

**C. MRS. JEAN A. LEFFLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1210 N. OLD MILL DRIVE

City DELTONA State FL Zip Code 32725-2861

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 683.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03657**

Amount of Each Receipt this Period  
 221.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	963.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1324 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TIMOTHY MICHAEL LEFFLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1301 KELSO BLVD.  
 City WINDERMERE State FL Zip Code 34786-7503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LEFFLER & HEANEY, INC. Occupation CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03658**  
 Amount of Each Receipt this Period 500.00

**B. MS. BETH LEHMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1406 NEWPORT SPRING CT  
 City RESTON State VA Zip Code 20194-1176  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FREDDIE MAC Occupation FINANCIAL MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03659**  
 Amount of Each Receipt this Period 220.00

**C. MR. CARL R. LEHMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 517 LINDEN ROAD  
 City HERSHEY State PA Zip Code 17033-1452  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 506.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03660**  
 Amount of Each Receipt this Period 506.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1226.00  
**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 1325 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES J. LEHMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5474 GOLF POINTE DRIVE  
 City SARASOTA State FL Zip Code 34243-3610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03661**  
 Amount of Each Receipt this Period  
 106.00

**B. MR. JAMES J. LEHMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5474 GOLF POINTE DRIVE  
 City SARASOTA State FL Zip Code 34243-3610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03662**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. HENDRIK A. LEHNERING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1578 E. FARLAND STREET  
 City COVINA State CA Zip Code 91724-2606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03663**  
 Amount of Each Receipt this Period  
 155.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 361.00  
**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 1326 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STANLEY LEHRER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 82 SHELBOURNE LANE  
 City NEW HYDE PARK State NY Zip Code 11040-1044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 331.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03664**  
 Amount of Each Receipt this Period  
 140.00

**B. MR. STANLEY LEHRER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 82 SHELBOURNE LANE  
 City NEW HYDE PARK State NY Zip Code 11040-1044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 331.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03665**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. STANLEY LEHRER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 82 SHELBOURNE LANE  
 City NEW HYDE PARK State NY Zip Code 11040-1044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 331.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03666**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 191.00  
**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 1327 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. RYAN MACK LEIFHEIT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2117 N 64TH ST  
 City QUINCY State IL Zip Code 62305-8821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer QUINCY ANESTHESIA ASSOCIATES Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03667**  
 Amount of Each Receipt this Period  
 550.00

**B. MR. JOHN A. LEIGHTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 163 STEARNS AVENUE  
 City PITTSFIELD State MA Zip Code 01201-7629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer APEX RESOURCE TECHNOLOGIES Occupation MOLDMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI03668**  
 Amount of Each Receipt this Period  
 135.00

**C. MR. JOHN A. LEIGHTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 163 STEARNS AVENUE  
 City PITTSFIELD State MA Zip Code 01201-7629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer APEX RESOURCE TECHNOLOGIES Occupation MOLDMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03669**  
 Amount of Each Receipt this Period  
 136.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 821.00  
**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 1328 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHRISTOPHER LEINES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 353  
 City MEDINA State MN Zip Code 55357-0353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MINNESOTA LIMITED Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03670**  
 Amount of Each Receipt this Period  
 32400.00

**B. ROBERT LEIPOLD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 478 CENTER STREET  
 City WOLFEBORO State NH Zip Code 03894-4814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03671**  
 Amount of Each Receipt this Period  
 500.00

**C. DR. JERALD W. LEISY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 NORFOLK DRIVE  
 City EASTBOROUGH State KS Zip Code 67208-4425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03672**  
 Amount of Each Receipt this Period  
 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32930.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE 1329 OF 2949
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. JERALD W. LEISY**  
Full Name (Last, First, Middle Initial)

Mailing Address 10 NORFOLK DRIVE

City EASTBOROUGH State KS Zip Code 67208-4425

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03673**

Amount of Each Receipt this Period  
 30.00

**B. MR. PETER J. LELLIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 6267 PIPING ROCK LANE

City HOUSTON State TX Zip Code 77057-4407

FEC ID number of contributing federal political committee. **C**

Name of Employer C.H.R. ENERGY PARTNERS Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03674**

Amount of Each Receipt this Period  
 120.00

**C. MRS. DONNA LEMMONS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1712 CONSTITUTION AVENUE

City ENID State OK Zip Code 73703-2041

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03675**

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**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 1330 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DONNA LEMMONS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1712 CONSTITUTION AVENUE  
 City ENID State OK Zip Code 73703-2041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03676**  
 Amount of Each Receipt this Period  
**100.00**

**B. MRS. ANN H. LEMON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 47  
 City JUNCTION State TX Zip Code 76849-0047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **330.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03677**  
 Amount of Each Receipt this Period  
**330.00**

**C. MR. HOVER LENTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7501 E. THOMPSON PEAK PARKWAY  
 UNIT 210  
 City SCOTTSDALE State AZ Zip Code 85255-4532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **370.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03678**  
 Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>530.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1331 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL LEONARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 4 LEONARD WAY

City DEPOSIT State NY Zip Code 13754-1240

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03679**

Amount of Each Receipt this Period  
 750.00

**B. MR. RALPH E. LEONARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 96 SARGENT DRIVE

City OLD TOWN State ME Zip Code 04468-1236

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03680**

Amount of Each Receipt this Period  
 150.00

**C. MR. JOSEPH T. LEONE**  
Full Name (Last, First, Middle Initial)

Mailing Address 83 PANORAMA TRAIL

City ROCHESTER State NY Zip Code 14625-1507

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03681**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1332 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. SUSAN BARBACANE LEOPOLD**

Mailing Address 2107 FOREST FALLS DRIVE

City KINGWOOD      State TX      Zip Code 77345-1778

FEC ID number of contributing federal political committee. **C**

Name of Employer SBL HOLDINGS, INC.      Occupation CHIEF FINANCIAL OFFICER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03682**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. MR. FRED WARREN LESSMAN**

Mailing Address 1844 WINNERS CUP DRIVE

City LAS VEGAS      State NV      Zip Code 89117-0824

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED      Occupation REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03683**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MR. MICHAEL D. LESTER**

Mailing Address 25 MIRIAM STREET  
APARTMENT 2

City JOHNSON CITY      State NY      Zip Code 13790-1658

FEC ID number of contributing federal political committee. **C**

Name of Employer PIEDMONT AIRLINES      Occupation MECHANIC

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03684**

Amount of Each Receipt this Period  
215.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 765.00

**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 1333 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ONA F. LESTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 HUMPHRIES ROAD N.W.  
 City State Zip Code  
 CONYERS GA 30012-2015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03685**  
 Amount of Each Receipt this Period  
 150.00

**B. MRS. ONA F. LESTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 HUMPHRIES ROAD N.W.  
 City State Zip Code  
 CONYERS GA 30012-2015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03686**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. ONA F. LESTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 HUMPHRIES ROAD N.W.  
 City State Zip Code  
 CONYERS GA 30012-2015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03687**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 1334 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CATHERINE LEUENBERGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3537 YELLOW CREEK RD.  
 City AKRON State OH Zip Code 44333-2221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03688**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. JAMES E. LEUTE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3490 NORTH KEY DRIVE  
 APT 305C  
 City NORTH FORT MYERS State FL Zip Code 33903-7090  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AMERIPRISE FINANCIAL SERVICES, INC. Occupation FINANCIAL ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03689**  
 Amount of Each Receipt this Period  
 25.00

**C. MR. BRUCE A. LEVAHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5800 SAINT CROIX AVENUE N.  
 APARTMENT C617  
 City MINNEAPOLIS State MN Zip Code 55422-4696  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2910.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03690**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1335 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. BRUCE A. LEVAHN</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI03691</b>
Mailing Address 5800 SAINT CROIX AVENUE N. APARTMENT C617		Amount of Each Receipt this Period 50.00
City MINNEAPOLIS	State MN	
Zip Code 55422-4696		Aggregate Year-to-Date ▼ 2910.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. MR. BRUCE A. LEVAHN</b>		Date of Receipt MM / DD / YYYY 03 / 11 / 2014 <b>Transaction ID : 2014M04L11AI03692</b>
Mailing Address 5800 SAINT CROIX AVENUE N. APARTMENT C617		Amount of Each Receipt this Period 50.00
City MINNEAPOLIS	State MN	
Zip Code 55422-4696		Aggregate Year-to-Date ▼ 2910.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. MR. BRUCE A. LEVAHN</b>		Date of Receipt MM / DD / YYYY 03 / 17 / 2014 <b>Transaction ID : 2014M04L11AI03693</b>
Mailing Address 5800 SAINT CROIX AVENUE N. APARTMENT C617		Amount of Each Receipt this Period 1100.00
City MINNEAPOLIS	State MN	
Zip Code 55422-4696		Aggregate Year-to-Date ▼ 2910.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1336 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRUCE A. LEVAHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5800 SAINT CROIX AVENUE N.  
 APARTMENT C617  
 City MINNEAPOLIS State MN Zip Code 55422-4696  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2910.00

Date of Receipt 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI03694**  
 Amount of Each Receipt this Period 200.00

**B. MR. LEON J. LEVEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1505 VIA CASTILLA  
 City PALOS VERDES ESTATES State CA Zip Code 90274-2852  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03695**  
 Amount of Each Receipt this Period 500.00

**C. MR. CHARLES T. LEVERICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 840 MILL CREEK ROAD  
 City LURAY State VA Zip Code 22835-5315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03696**  
 Amount of Each Receipt this Period 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1337 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HERBERT ALAN LEVIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 724 E. GRINNELL DRIVE  
 City State Zip Code  
 BURBANK CA 91501-1720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DEPARTMENT OF JUSTICE OF THE STATE C LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03697**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. HERBERT ALAN LEVIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 724 E. GRINNELL DRIVE  
 City State Zip Code  
 BURBANK CA 91501-1720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DEPARTMENT OF JUSTICE OF THE STATE C LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03698**  
 Amount of Each Receipt this Period  
 35.00

**C. MR. STEVEN M. LEVY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 59 PECKSLAND ROAD  
 City State Zip Code  
 GREENWICH CT 06831-3711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF REAL ESTATE BROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03699**  
 Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5060.00  
**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 1338 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES DALLAS LEWELLING**  
Full Name (Last, First, Middle Initial)

Mailing Address 754 E. JOSEPHINE CANYON DRIVE

City GREEN VALLEY	State AZ	Zip Code 85614-6069
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2014

**Transaction ID : 2014M04L11AI03700**

Amount of Each Receipt this Period  
60.00

**B. MR. JAMES DALLAS LEWELLING**  
Full Name (Last, First, Middle Initial)

Mailing Address 754 E. JOSEPHINE CANYON DRIVE

City GREEN VALLEY	State AZ	Zip Code 85614-6069
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2014

**Transaction ID : 2014M04L11AI03701**

Amount of Each Receipt this Period  
100.00

**C. MRS. PHYLLIS O. LEWELLYN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1125 TIMBERLAND DRIVE S.E.

City MARIETTA	State GA	Zip Code 30067-5120
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
236.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2014

**Transaction ID : 2014M04L11AI03702**

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	185.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1339 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PHYLLIS O. LEWELLYN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1125 TIMBERLAND DRIVE S.E.  
 City State Zip Code  
 MARIETTA GA 30067-5120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 236.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03703**  
 Amount of Each Receipt this Period  
 51.00

**B. MRS. PHYLLIS O. LEWELLYN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1125 TIMBERLAND DRIVE S.E.  
 City State Zip Code  
 MARIETTA GA 30067-5120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 236.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03704**  
 Amount of Each Receipt this Period  
 25.00

**C. MR. ASHLEY E. LEWIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1466 FERRIS AVENUE  
 City State Zip Code  
 LINCOLN PARK MI 48146-2014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03705**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 176.00  
**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 1341 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. DAVID A. LEWIS</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI03709</b>
Mailing Address 85 HICKORY RIDGE COURT		Amount of Each Receipt this Period 110.00
City MORTON	State IL	Zip Code 61550-1107
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>B. MR. DONALD C. LEWIS</b>		Date of Receipt 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI03710</b>
Mailing Address 10644 YATES DRIVE		Amount of Each Receipt this Period 100.00
City WESTMINSTER	State CO	Zip Code 80031-1984
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. MR. ELMER E. LEWIS</b>		Date of Receipt 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI03711</b>
Mailing Address 102 FRANCES DRIVE		Amount of Each Receipt this Period 50.00
City YORKTOWN	State VA	Zip Code 23692-3229
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	260.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1342 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES D. LEWIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 626  
 City HEALDTON State OK Zip Code 73438-0626  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03712**  
 Amount of Each Receipt this Period  
 110.00

**B. MRS. JUDY GRIGGS LEWIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 805 TOWER ROAD  
 City CHRISTIANSBURG State VA Zip Code 24073-4111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03713**  
 Amount of Each Receipt this Period  
 500.00

**C. MRS. LASCA LEWIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5000 ARKANSHIRE CIRCLE  
 APARTMENT 205  
 City SPRINGDALE State AR Zip Code 72764-2837  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03714**  
 Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 640.00  
**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 1343 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LASCA LEWIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 5000 ARKANSHIRE CIRCLE  
APARTMENT 205

City SPRINGDALE State AR Zip Code 72764-2837

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03715**

Amount of Each Receipt this Period  
100.00

**B. MRS. MARY SANDERS LEWIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 3854 WATSON CIRCLE

City GAINESVILLE State GA Zip Code 30504-5424

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03716**

Amount of Each Receipt this Period  
120.00

**C. MR. MONTE J. LEWIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 33890 POWELL HILLS LOOP

City SHEDD State OR Zip Code 97377-9773

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03717**

Amount of Each Receipt this Period  
220.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 440.00

**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 1344 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT J. LEWIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 ELK POINTE LANE  
 City State Zip Code  
 CASTLE ROCK CO 80108-9166  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03718**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. ROBERT J. LEWIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 ELK POINTE LANE  
 City State Zip Code  
 CASTLE ROCK CO 80108-9166  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03719**  
 Amount of Each Receipt this Period  
 75.00

**C. MR. WILLIAM C. LEWIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1105 ESTHER BLVD.  
 City State Zip Code  
 BRYAN TX 77802-1924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03720**  
 Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 155.00  
**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 1345 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM C. LEWIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1105 ESTHER BLVD.  
 City BRYAN State TX Zip Code 77802-1924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03721**  
 Amount of Each Receipt this Period 50.00

**B. MR. WILLIAM C. LEWIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1105 ESTHER BLVD.  
 City BRYAN State TX Zip Code 77802-1924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03721**  
 Amount of Each Receipt this Period 45.00

**C. MR. WILLIAM C. LEWIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1105 ESTHER BLVD.  
 City BRYAN State TX Zip Code 77802-1924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 566.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03723**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 145.00  
**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 1346 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM C. LEWIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1105 ESTHER BLVD.

City BRYAN State TX Zip Code 77802-1924

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03724**

Amount of Each Receipt this Period  
 30.00

**B. MR. WILLIAM C. LEWIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1105 ESTHER BLVD.

City BRYAN State TX Zip Code 77802-1924

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 566.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03725**

Amount of Each Receipt this Period  
 51.00

**C. L. G. LEWIS, JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 314 BAY HILL DRIVE

City WEST UNION State SC Zip Code 29696-3935

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03726**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 331.00

**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 1347 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JANE L. LEWIT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2120 HARBOURSIDE DR  
 UNIT 633  
 City LONGBOAT KEY State FL Zip Code 34228-4263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03727**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. XIAO M. LI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5008 S 215 ST  
 City KENT State WA Zip Code 98032-8496  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CHINA FIRST RESTAURANT Occupation RESTARAUNT OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03728**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. XIAO M. LI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5008 S 215 ST  
 City KENT State WA Zip Code 98032-8496  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CHINA FIRST RESTAURANT Occupation RESTARAUNT OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03729**  
 Amount of Each Receipt this Period  
 275.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1348 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. XIAO M. LI</b>		Date of Receipt
Mailing Address 5008 S 215 ST		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2014
City	State	Zip Code
KENT	WA	98032-8496
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03730
C		Amount of Each Receipt this Period
		100.00
Name of Employer	Occupation	
CHINA FIRST RESTAURANT	RESTARAUNT OWNER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1150.00	

Full Name (Last, First, Middle Initial) <b>B. MR. EDMUND W. LIBBY</b>		Date of Receipt
Mailing Address 1125 WESTBRIAR COURT N.E.		M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2014
City	State	Zip Code
VIENNA	VA	22180-3666
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03731
C		Amount of Each Receipt this Period
		100.00
Name of Employer	Occupation	
NORTHROP GRUMMAN	DIRECTOR OF INTERNATIONAL OPERATIOI	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	210.00	

Full Name (Last, First, Middle Initial) <b>C. MS. SANDRA J. LICKWALA</b>		Date of Receipt
Mailing Address P.O. BOX 517		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014
City	State	Zip Code
SAINT CLAIR	MI	48079-0517
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03732
C		Amount of Each Receipt this Period
		200.00
Name of Employer	Occupation	
SELF-EMPLOYED	BUSINESS OWNER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1349 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. WALTER S. LIGHT</b>		Date of Receipt
Mailing Address 300 ARGYLE AVENUE		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City	State	Zip Code
SAN ANTONIO	TX	78209-5609
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03733
C		Amount of Each Receipt this Period
		1000.00
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		1000.00
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. ROBERT L. LILLY</b>		Date of Receipt
Mailing Address 104 ASTER CIRCLE		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014
City	State	Zip Code
GEORGETOWN	TX	78633-4537
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03734
C		Amount of Each Receipt this Period
		250.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		250.00
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MRS. SHARON F. LINDAU</b>		Date of Receipt
Mailing Address 2825 MEDICINE RIDGE ROAD		M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014
City	State	Zip Code
PLYMOUTH	MN	55441-3259
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03735
C		Amount of Each Receipt this Period
		2500.00
Name of Employer	Occupation	
CALVARY LUTHERAN	CHURCH ADMINISTRATOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		2500.00
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1350 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SUJANE LINDBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5768 GLENEAGLES DRIVE  
 City PLANO State TX Zip Code 75093-5975  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03736**  
 Amount of Each Receipt this Period 200.00

**B. MR. JAMES G. LINDELL JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 162 ARABELLA COURT  
 City CARY State NC Zip Code 27518-7155  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03737**  
 Amount of Each Receipt this Period 250.00

**C. MR. ROBERT C. LINDEMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 OAK LANE  
 City PARK FOREST State IL Zip Code 60466-2030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03738**  
 Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 475.00  
**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 1351 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT C. LINDEMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 OAK LANE  
 City State Zip Code  
 PARK FOREST IL 60466-2030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03739**  
 Amount of Each Receipt this Period  
 135.00

**B. MR. STEVEN C. LINDSAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1418 TRAILS END  
 City State Zip Code  
 SALADO TX 76571-5892  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED FINANCIAL REPRESENTATIVE  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03740**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. LOUIS B. LINDSEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3825 324TH AVENUE S.E.  
 City State Zip Code  
 FALL CITY WA 98024-7713  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03741**  
 Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 270.00  
**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 1352 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARCIA P. LINDSTROM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 269 RAINBOW FALLS ROAD  
 City FRANKLIN State NC Zip Code 28734-0027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03742**  
 Amount of Each Receipt this Period  
 101.00

**B. MRS. AVIS LINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 274 TERRACE AVENUE  
 City WESTON State WV Zip Code 26452-1539  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03743**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. AVIS LINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 274 TERRACE AVENUE  
 City WESTON State WV Zip Code 26452-1539  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03744**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	202.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1353 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT LINGG**  
Full Name (Last, First, Middle Initial)

Mailing Address 249 LEISURE WORLD

City MESA State AZ Zip Code 85206-3138

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03745**

Amount of Each Receipt this Period  
 50.00

**B. MR. ROBERT LINGG**  
Full Name (Last, First, Middle Initial)

Mailing Address 249 LEISURE WORLD

City MESA State AZ Zip Code 85206-3138

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03746**

Amount of Each Receipt this Period  
 51.00

**C. MR. THOMAS D. LINHARES**  
Full Name (Last, First, Middle Initial)

Mailing Address 15359 FOUNDERS LANE  
APARTMENT 221

City SAINT PAUL State MN Zip Code 55124-6153

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03747**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 201.00

**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 1355 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PHILIP E. LIPPINCOTT**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2159

City PARK CITY State UT Zip Code 84060-2159

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

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  
**03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI03751**

Amount of Each Receipt this Period  
**300.00**

**B. MR. RICHARD A. LIPSEY**  
Full Name (Last, First, Middle Initial)

Mailing Address L LAKEWOOD POINT DRIVE

City BATON ROUGE State LA Zip Code 70810

FEC ID number of contributing federal political committee. **C**

Name of Employer LIPSEY'S LLC Occupation WHOLESALE

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  
**03 / 27 / 2014**  
**Transaction ID : 2014M04L11AI03752**

Amount of Each Receipt this Period  
**300.00**

**C. VALERIE LISTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4818 E 112TH ST

City TULSA State OK Zip Code 74137-7520

FEC ID number of contributing federal political committee. **C**

Name of Employer BERENDSEN FLUID POWER Occupation C.F.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI03753**

Amount of Each Receipt this Period  
**2500.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>3100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1356 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JEFFREY D. LITMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35 ROYAL ANN DRIVE  
 City GREENWOOD VILLAGE State CO Zip Code 80111-1408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03754**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. ROBERT B. LITTELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14503 CLIFTY CT.  
 City TAMPA State FL Zip Code 33624-2600  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 249.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03755**  
 Amount of Each Receipt this Period  
 33.00

**C. MR. ROBERT B. LITTELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14503 CLIFTY CT.  
 City TAMPA State FL Zip Code 33624-2600  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 249.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03756**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	383.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1357 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT B. LITTELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14503 CLIFTY CT.  
 City TAMPA State FL Zip Code 33624-2600  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 249.00

Date of Receipt  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03757**  
 Amount of Each Receipt this Period  
 50.00

**B. MRS. ANN WYATT LITTLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 556 PICKETT ROAD S.W.  
 City MARIETTA State GA Zip Code 30064-3338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03758**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. ANN WYATT LITTLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 556 PICKETT ROAD S.W.  
 City MARIETTA State GA Zip Code 30064-3338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03759**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00  
**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 1358 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. FRANCES W. LITTLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1709 BARRINGTON COURT  
 City State Zip Code  
 FORT COLLINS CO 80524-1951  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**850.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI03760**  
 Amount of Each Receipt this Period  
**750.00**

**B. MR. FRED K. LITTLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 426 BROADWAY STREET  
 City State Zip Code  
 CLOQUET MN 55720-1749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI03761**  
 Amount of Each Receipt this Period  
**100.00**

**C. MR. WILLIAM MICHAEL LITTLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3400 CRAIG DRIVE  
 APARTMENT 1213  
 City State Zip Code  
 MCKINNEY TX 75070-4515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
**295.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI03762**  
 Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **900.00**  
**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 1359 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. ELOISE E. LITTLER</b>		Date of Receipt
Mailing Address 4005 N. GRANDVIEW DRIVE		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City PEORIA	State IL	Zip Code 61614-6624
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI03763</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="201.00"/>		

Full Name (Last, First, Middle Initial) <b>B. MRS. ELOISE E. LITTLER</b>		Date of Receipt
Mailing Address 4005 N. GRANDVIEW DRIVE		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City PEORIA	State IL	Zip Code 61614-6624
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI03764</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="101.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="201.00"/>		

Full Name (Last, First, Middle Initial) <b>C. MR. LAWRENCE R. LITTRELL</b>		Date of Receipt
Mailing Address P.O. BOX 116		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City FAWNSKIN	State CA	Zip Code 92333-0116
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI03765</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="275.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="226.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1360 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANK F. LIU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 128 CLEMSON ROAD  
 City BRYN MAWR State PA Zip Code 19010-3719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 761.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03766**  
 Amount of Each Receipt this Period  
 65.00

**B. MR. FRANK F. LIU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 128 CLEMSON ROAD  
 City BRYN MAWR State PA Zip Code 19010-3719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 761.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03767**  
 Amount of Each Receipt this Period  
 65.00

**C. MR. FRANK F. LIU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 128 CLEMSON ROAD  
 City BRYN MAWR State PA Zip Code 19010-3719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 761.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03768**  
 Amount of Each Receipt this Period  
 65.00

**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 1361 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. FRANK F. LIU</b>		Date of Receipt 03 / 14 / 2014 <b>Transaction ID : 2014M04L11AI03769</b>
Mailing Address 128 CLEMSON ROAD		Amount of Each Receipt this Period 100.00
City BRYN MAWR	State PA	Zip Code 19010-3719
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 761.00	

Full Name (Last, First, Middle Initial) <b>B. MR. FRANK F. LIU</b>		Date of Receipt 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI03770</b>
Mailing Address 128 CLEMSON ROAD		Amount of Each Receipt this Period 66.00
City BRYN MAWR	State PA	Zip Code 19010-3719
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 761.00	

Full Name (Last, First, Middle Initial) <b>C. MR. JOHN R. LIVINGSTON</b>		Date of Receipt 03 / 12 / 2014 <b>Transaction ID : 2014M04L11AI03771</b>
Mailing Address 2885 PEASE DRIVE APARTMENT 214		Amount of Each Receipt this Period 510.00
City ROCKY RIVER	State OH	Zip Code 44116-3233
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer BOARD OF ELECTIONS	Occupation CUYAHOGA COUNTY CLERK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	676.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1362 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MATIAS LLANOS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2100 N.E. 185TH STREET

City MIAMI	State FL	Zip Code 33179
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03772**

Amount of Each Receipt this Period  
 100.00

**B. MR. MATIAS LLANOS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2100 N.E. 185TH STREET

City MIAMI	State FL	Zip Code 33179
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03773**

Amount of Each Receipt this Period  
 100.00

**C. MR. MATIAS LLANOS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2100 N.E. 185TH STREET

City MIAMI	State FL	Zip Code 33179
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03774**

Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1363 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARVIN D. LLEWELLYN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 34315 KEYSTONE DRIVE  
 City State Zip Code  
 SOLDOTNA AK 99669-8538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03775**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. ROBERT W. LLOYD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1103 HONEYSUCKLE DRIVE  
 City State Zip Code  
 PRATTVILLE AL 36067-6210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03776**  
 Amount of Each Receipt this Period  
 315.00

**C. MR. ROBERT W. LLOYD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1103 HONEYSUCKLE DRIVE  
 City State Zip Code  
 PRATTVILLE AL 36067-6210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03777**  
 Amount of Each Receipt this Period  
 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	465.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1364 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT W. LLOYD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1103 HONEYSUCKLE DRIVE  
 City State Zip Code  
 PRATTVILLE AL 36067-6210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03778**  
 Amount of Each Receipt this Period  
 20.00

**B. MR. YU C. LO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4310 CALDWELL STREET  
 City State Zip Code  
 METAIRIE LA 70001-2514  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED CIVIL ENGINEER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03779**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. LOUIS FRANCIS LO BUE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22 EDWARD DRIVE  
 City State Zip Code  
 NORTH GRAFTON MA 01536-1199  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NICHOLS COLLEGE ADJUNCT PROFESSOR IN ACCOUNTING  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03780**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 240.00  
**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 1365 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LOUIS FRANCIS LO BUE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22 EDWARD DRIVE  
 City NORTH GRAFTON State MA Zip Code 01536-1199  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NICHOLS COLLEGE Occupation ADJUNCT PROFESSOR IN ACCOUNTING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03781**  
 Amount of Each Receipt this Period  
 35.00

**B. MR. LOUIS FRANCIS LO BUE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22 EDWARD DRIVE  
 City NORTH GRAFTON State MA Zip Code 01536-1199  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NICHOLS COLLEGE Occupation ADJUNCT PROFESSOR IN ACCOUNTING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03782**  
 Amount of Each Receipt this Period  
 25.00

**C. MRS. CAROL M. LOCKEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2708 W. MARLIN AVENUE  
 City TAMPA State FL Zip Code 33611-3809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03783**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 310.00  
**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 1366 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM A. LOCKWOOD**  
Full Name (Last, First, Middle Initial)

Mailing Address 88 HUNTINGTON ROAD

City GARDEN CITY State NY Zip Code 11530-3122

FEC ID number of contributing federal political committee. **C**

Name of Employer EMPIRE VALUATION Occupation BUSINESS OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03784**

Amount of Each Receipt this Period  
 1000.00

**B. MR. JACK LOCOCO**  
Full Name (Last, First, Middle Initial)

Mailing Address 1065 SESAME STREET

City FRANKLIN PARK State IL Zip Code 60131-1316

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03785**

Amount of Each Receipt this Period  
 101.00

**C. MR. JACK LOCOCO**  
Full Name (Last, First, Middle Initial)

Mailing Address 1065 SESAME STREET

City FRANKLIN PARK State IL Zip Code 60131-1316

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03786**

Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1102.00

**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 1367 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ANDREW JOHN LODUHA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5505 MOHAWK ROAD  
 City RHINELANDER State WI Zip Code 54501-9349  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03787**  
 Amount of Each Receipt this Period  
 251.00

**B. MR. KARL LOEFFLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 109 SHORE DRIVE  
 City DUNEDIN State FL Zip Code 34698-2545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03788**  
 Amount of Each Receipt this Period  
 251.00

**C. DR. DAVID LOESCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2262 WILLOW CIRCLE DRIVE  
 City GREENWOOD State IN Zip Code 46143-9346  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03789**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 802.00  
**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 1368 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOEL A. LOFSTROM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 602  
 City LAMAR State CO Zip Code 81052-0602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LAMAR LIGHT AND POWER Occupation MECHANICAL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI03790**  
 Amount of Each Receipt this Period  
 60.00

**B. MR. JOEL A. LOFSTROM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 602  
 City LAMAR State CO Zip Code 81052-0602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LAMAR LIGHT AND POWER Occupation MECHANICAL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03791**  
 Amount of Each Receipt this Period  
 60.00

**C. MR. DONALD LOFTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7509 68TH AVENUE W.  
 City LAKEWOOD State WA Zip Code 98499-8153  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03792**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	240.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1369 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DIANA LOGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 505 OCCIDENTAL AVENUE  
 City SAN MATEO State CA Zip Code 94402-1052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03793**  
 Amount of Each Receipt this Period  
 250.00

**B. MS. MARY M. LOGASA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 957 FAIRWAY DRIVE  
 City SONOMA State CA Zip Code 95476-3707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03794**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. ARTHUR LOHMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6795 E CALLE LA PAZ UNIT 4102  
 City TUCSON State AZ Zip Code 85715-9024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03795**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	420.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1370 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GUS H. LONDON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1705 ROGERS DRIVE

City TUPELO State MS Zip Code 38804-1329

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03796**

Amount of Each Receipt this Period  
 35.00

**B. MR. GUS H. LONDON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1705 ROGERS DRIVE

City TUPELO State MS Zip Code 38804-1329

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03797**

Amount of Each Receipt this Period  
 30.00

**C. MR. GUS H. LONDON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1705 ROGERS DRIVE

City TUPELO State MS Zip Code 38804-1329

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03798**

Amount of Each Receipt this Period  
 41.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 106.00

**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 1371 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GUS H. LONDON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1705 ROGERS DRIVE

City TUPELO State MS Zip Code 38804-1329

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03799**

Amount of Each Receipt this Period  
 30.00

**B. MR. GUS H. LONDON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1705 ROGERS DRIVE

City TUPELO State MS Zip Code 38804-1329

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03800**

Amount of Each Receipt this Period  
 75.00

**C. MRS. SHERRY LONDON**  
Full Name (Last, First, Middle Initial)

Mailing Address 5605 SAN FLORENTINE AVENUE

City LAS VEGAS State NV Zip Code 89141-3866

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03801**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 355.00

**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 1372 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID LONG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1411 BLUEBERRY LANE  
 City FRIENDSWOOD State TX Zip Code 77546-5214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI03802**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. GEORGE B. LONG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 609 EAST STREET  
 City BOTTINEAU State ND Zip Code 58318-1427  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03803**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. GORDON G. LONG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 315 S. LAKE DRIVE  
 APARTMENT 2B  
 City PALM BEACH State FL Zip Code 33480-4525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03804**  
 Amount of Each Receipt this Period  
 360.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	611.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1374 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SUE T. LONG**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1125 SADDLE WAY

City RICHLAND	State WA	Zip Code 99352-9640
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CLINICAL LABORATORIES, P.S.	Occupation ADMINISTRATOR
---	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03808**

Amount of Each Receipt this Period  
250.00

**B. MS. VIRGINIA D. LONG**  
Full Name (Last, First, Middle Initial)  
Mailing Address 22946 ESPADA DRIVE

City SALINAS	State CA	Zip Code 93908-1015
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03809**

Amount of Each Receipt this Period  
100.00

**C. MS. VIRGINIA D. LONG**  
Full Name (Last, First, Middle Initial)  
Mailing Address 22946 ESPADA DRIVE

City SALINAS	State CA	Zip Code 93908-1015
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03810**

Amount of Each Receipt this Period  
101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	451.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1375 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT F. LONGBINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4150 INDIAN RIVER BLVD.  
 APARTMENT 104  
 City VERO BEACH State FL Zip Code 32967-7224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03811**  
 Amount of Each Receipt this Period 100.00

**B. MR. ROBERT F. LONGBINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4150 INDIAN RIVER BLVD.  
 APARTMENT 104  
 City VERO BEACH State FL Zip Code 32967-7224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03812**  
 Amount of Each Receipt this Period 101.00

**C. MR. BRUCE E. LONGENECKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3965 W. 83RD STREET #350  
 City SHAWNEE MISSION State KS Zip Code 66208-5308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03813**  
 Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1201.00  
**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 1376 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RUEL W. LONGFELLOW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21 MURIEL ROAD  
 City State Zip Code  
 SWAMPSCOTT MA 01907-2643  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 UNITED STATES POSTAL SERVICE SALES  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03814**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. ROBERT O. LONGHCHAMPS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 4328  
 City State Zip Code  
 MANCHESTER NH 03108-4328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED ELECTRICAL CONTRACTOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03815**  
 Amount of Each Receipt this Period  
 250.00

**C. MS. BARBARA LONGWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 650 HARRISON AVENUE  
 City State Zip Code  
 CLAREMONT CA 91711-4538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI03816**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00  
**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 1377 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. MARK LOOS**  
Full Name (Last, First, Middle Initial)

Mailing Address 361 SAINT ANDREWS LANE

City HALF MOON BAY State CA Zip Code 94019-2226

FEC ID number of contributing federal political committee. **C**

Name of Employer C.U.S.D. Occupation DIRECTOR STUDENT SERVICES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03817**

Amount of Each Receipt this Period  
 1000.00

**B. MR. ALFONSO LOPEZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 207 E. IRELAND COURT

City HERNANDO State FL Zip Code 34442-3370

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI03818**

Amount of Each Receipt this Period  
 120.00

**C. MRS. JOLENE R. LOPEZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 36568 INNISBROOK CIRCLE

City PURCELLVILLE State VA Zip Code 20132-9011

FEC ID number of contributing federal political committee. **C**

Name of Employer BOOZ ALLEN HAMILTON Occupation DEFENSE CONTRACTOR

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  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03819**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1378 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JOLENE R. LOPEZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 36568 INNISBROOK CIRCLE

City PURCELLVILLE State VA Zip Code 20132-9011

FEC ID number of contributing federal political committee. **C**

Name of Employer BOOZ ALLEN HAMILTON Occupation DEFENSE CONTRACTOR

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  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03820**

Amount of Each Receipt this Period  
 50.00

**B. MR. OSCAR G. LOPEZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 222 W. 9TH STREET APARTMENT 4

City GRAND ISLAND State NE Zip Code 68801-3954

FEC ID number of contributing federal political committee. **C**

Name of Employer J.B.S SWIFT & COMPANY Occupation LABORER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03821**

Amount of Each Receipt this Period  
 50.00

**C. MR. OSCAR G. LOPEZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 222 W. 9TH STREET APARTMENT 4

City GRAND ISLAND State NE Zip Code 68801-3954

FEC ID number of contributing federal political committee. **C**

Name of Employer J.B.S SWIFT & COMPANY Occupation LABORER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 291.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03822**

Amount of Each Receipt this Period  
 61.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 161.00

**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 1379 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. KATHLEEN LORENCZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18819 WARWICK  
 City BEVERLY HILLS State MI Zip Code 48025-4068  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03823**  
 Amount of Each Receipt this Period  
 101.00

**B. MS. KATHLEEN LORENCZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18819 WARWICK  
 City BEVERLY HILLS State MI Zip Code 48025-4068  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03824**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. CHARLES KEMPER LORRAINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10108 ROSEMONT COURT  
 City FORT MYERS State FL Zip Code 33908-2835  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03825**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	321.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1380 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DON R. LOTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6549 VAN BUREN STREET  
 City MERRILLVILLE State IN Zip Code 46410-3239  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03826**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. DON R. LOTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6549 VAN BUREN STREET  
 City MERRILLVILLE State IN Zip Code 46410-3239  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03827**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. JAMES H. LOTT JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 133 HERITAGE CIRCLE  
 City BIRMINGHAM State AL Zip Code 35213-2525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03828**  
 Amount of Each Receipt this Period  
 220.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	441.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1381 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE I. LOVATT**  
Full Name (Last, First, Middle Initial)

Mailing Address 10980 STROUP ROAD

City ROSWELL State GA Zip Code 30075-2218

FEC ID number of contributing federal political committee. **C**

Name of Employer LOVATT AND RUSHING, INC. Occupation PEANUT BROKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03829**

Amount of Each Receipt this Period  
 200.00

**B. MR. GEORGE I. LOVATT**  
Full Name (Last, First, Middle Initial)

Mailing Address 10980 STROUP ROAD

City ROSWELL State GA Zip Code 30075-2218

FEC ID number of contributing federal political committee. **C**

Name of Employer LOVATT AND RUSHING, INC. Occupation PEANUT BROKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03830**

Amount of Each Receipt this Period  
 250.00

**C. MR. LESLIE RUSSELL LOVE**  
Full Name (Last, First, Middle Initial)

Mailing Address 25 SCENIC VIEW DRIVE

City WEAVERVILLE State NC Zip Code 28787-9379

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03831**

Amount of Each Receipt this Period  
 201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	651.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1382 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. LINDA LOVE</b>		Date of Receipt
Mailing Address 11616 CALLE SIMPSON		M M M / D D D / Y Y Y Y Y Y 03 / 19 / 2014
City	State	Zip Code
EL CAJON	CA	92019-4012
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03832</b>
Name of Employer REQUESTED		Amount of Each Receipt this Period
Occupation REQUESTED		250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	450.00	

Full Name (Last, First, Middle Initial) <b>B. MR. ELLIOTT H. LOVELACE</b>		Date of Receipt
Mailing Address 9487 N CONCHO DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 19 / 2014
City	State	Zip Code
KINGMAN	AZ	86401-8138
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03833</b>
Name of Employer SELF-EMPLOYED		Amount of Each Receipt this Period
Occupation MINISTER		120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	220.00	

Full Name (Last, First, Middle Initial) <b>C. MS. LORRAINE MAE LOVELACE</b>		Date of Receipt
Mailing Address 4974 RIO VERDE DR		M M M / D D D / Y Y Y Y Y Y 03 / 03 / 2014
City	State	Zip Code
SAN JOSE	CA	95118-2303
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03834</b>
Name of Employer IHSS		Amount of Each Receipt this Period
Occupation PROVIDER		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	420.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1383 OF 2949
	<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. LORRAINE MAE LOVELACE</b>		Date of Receipt
Mailing Address 4974 RIO VERDE DR		M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2014
City	State	Zip Code
SAN JOSE	CA	95118-2303
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03835</b>
Name of Employer IHSS		Amount of Each Receipt this Period
Occupation PROVIDER		300.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	300.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. DAVID W. LOVELAND</b>		Date of Receipt
Mailing Address 709 EAYRESTOWN ROAD		M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014
City	State	Zip Code
LUMBERTON	NJ	08048-3176
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03836</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		100.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	210.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MS. CLARA JANE LOVELL</b>		Date of Receipt
Mailing Address P.O. BOX 158		M M M / D D D / Y Y Y Y Y Y 03 / 18 / 2014
City	State	Zip Code
EGYPT	TX	77436-0158
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI03837</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		220.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	220.00	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	345.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1384 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LINSEY D. LOW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 DUCKTRAP ROAD  
 City LINCOLNVILLE State ME Zip Code 04849-5222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03838**  
 Amount of Each Receipt this Period 300.00

**B. MR. GARY E. LOWE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12852 CENTURY STREET  
 City OVERLAND PARK State KS Zip Code 66213-2291  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03839**  
 Amount of Each Receipt this Period 1.00

**C. MR. GARY E. LOWE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12852 CENTURY STREET  
 City OVERLAND PARK State KS Zip Code 66213-2291  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03840**  
 Amount of Each Receipt this Period 125.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	426.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1385 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KIRK LOWE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1407 GRANT STREET  
 City SANTA MONICA State CA Zip Code 90405-1613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NORTHROP GRUMMER Occupation ELECTRICAL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03841**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. SHIRLEY M. LOWE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 88800 WINTER LANE  
 City VENETA State OR Zip Code 97487-9641  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03842**  
 Amount of Each Receipt this Period  
 150.00

**C. MRS. SHIRLEY M. LOWE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 88800 WINTER LANE  
 City VENETA State OR Zip Code 97487-9641  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI03843**  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00  
**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 1386 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CAROLYN J. LOWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 675 LONGBOAT CLUB ROAD  
 UNIT 22B  
 City LONGBOAT KEY State FL Zip Code 34228-3868  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VOLUNTEER Occupation VOLUNTEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03844**  
 Amount of Each Receipt this Period  
 4000.00

**B. MR. BERT LOWENTHAL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 264 N. BLAKE ROAD  
 City NORFOLK State VA Zip Code 23505-4404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03845**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. BERT LOWENTHAL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 264 N. BLAKE ROAD  
 City NORFOLK State VA Zip Code 23505-4404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03846**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1387 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BERT LOWENTHAL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 264 N. BLAKE ROAD  
 City NORFOLK State VA Zip Code 23505-4404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03847**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. BERT LOWENTHAL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 264 N. BLAKE ROAD  
 City NORFOLK State VA Zip Code 23505-4404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03848**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. FRED LOWRY SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 967 E. PIONEER ROAD  
 City DRAPER State UT Zip Code 84020-9334  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LOWRY & ASSOCIATE, INC. Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03849**  
 Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 161.00  
**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 1388 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JOAN LOZINAK**  
Full Name (Last, First, Middle Initial)

Mailing Address 3021 COOL BRANCH ROAD  
P.O. BOX 159

City CHURCHVILLE State MD Zip Code 21028-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
03 / 27 / 2014  
Transaction ID : 2014M04L11AI03850

Amount of Each Receipt this Period  
201.00

**B. MR. JAMES LUCAS**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 728

City MILES CITY State MT Zip Code 59301-0728

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  
03 / 25 / 2014  
Transaction ID : 2014M04L11AI03851

Amount of Each Receipt this Period  
70.00

**C. MR. JAMES LUCAS**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 728

City MILES CITY State MT Zip Code 59301-0728

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  
03 / 26 / 2014  
Transaction ID : 2014M04L11AI03852

Amount of Each Receipt this Period  
95.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 366.00

**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 1389 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS H. LUCAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6380 WASHINGTON AVENUE  
 City UNIVERSITY CITY State MO Zip Code 63130-4705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BROWN SHOE CO. Occupation S.V.P. - FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03853**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. ALBERT LUCE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 112 MAIMONT CIRCLE  
 City MACON State GA Zip Code 31210-4148  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03854**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. ROBERT P. LUCIANO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3030 SAVANNAH PLACE  
 City VERO BEACH State FL Zip Code 32963-4763  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03855**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1390 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. BARBARA LUCZYSZYN**  
Full Name (Last, First, Middle Initial)

Mailing Address 6350 PIDCOCK CREEK ROAD

City NEW HOPE	State PA	Zip Code 18938-9314
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
305.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2014

**Transaction ID : 2014M04L11AI03856**

Amount of Each Receipt this Period  
120.00

**B. MS. BARBARA LUCZYSZYN**  
Full Name (Last, First, Middle Initial)

Mailing Address 6350 PIDCOCK CREEK ROAD

City NEW HOPE	State PA	Zip Code 18938-9314
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
305.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2014

**Transaction ID : 2014M04L11AI03857**

Amount of Each Receipt this Period  
185.00

**C. MRS. INGRID LUDSCHEIDT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1230 TAYLOR LANE EXT.  
UNIT 126

City LEHIGH ACRES	State FL	Zip Code 33936-6160
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : 2014M04L11AI03858**

Amount of Each Receipt this Period  
70.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1391 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GLEN LUDWIG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5365 N. LEROY  
 City SAN BERNARDINO State CA Zip Code 92404-1142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CIVIL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03859**  
 Amount of Each Receipt this Period  
 400.00

**B. MR. GLEN LUDWIG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5365 N. LEROY  
 City SAN BERNARDINO State CA Zip Code 92404-1142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CIVIL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03860**  
 Amount of Each Receipt this Period  
 400.00

**C. MS. JULIA LUDWIG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 44029 HALCOM AVENUE  
 City LANCASTER State CA Zip Code 93536-6053  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03861**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1392 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PIERRE LUGOSCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4111 SHERWOOD LANE  
 City HOUSTON State TX Zip Code 77092-7807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AZTOA LIMITED Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03862**  
 Amount of Each Receipt this Period 100.00

**B. MR. PIERRE LUGOSCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4111 SHERWOOD LANE  
 City HOUSTON State TX Zip Code 77092-7807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AZTOA LIMITED Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03863**  
 Amount of Each Receipt this Period 200.00

**C. MR. CHOI WAI LUK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7502 EICHLER DRIVE  
 City HOUSTON State TX Zip Code 77036-6014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ACUPUNCTURIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03864**  
 Amount of Each Receipt this Period 550.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**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 1393 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. JAMES D. LUKETICH**  
Full Name (Last, First, Middle Initial)

Mailing Address 30 SWEET WATER LANE

City PITTSBURGH State PA Zip Code 15238-1901

FEC ID number of contributing federal political committee. **C**

Name of Employer: UNIVERSITY OF PITTSBURGH MEDICAL CENT Occupation: PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03865**

Amount of Each Receipt this Period: 220.00

**B. JARID LUNDEEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 5500 9TH STREET SE

City MINOT State ND Zip Code 58701-3228

FEC ID number of contributing federal political committee. **C**

Name of Employer: SELF-EMPLOYED Occupation: REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03866**

Amount of Each Receipt this Period: 375.00

**C. MR. GLENN H. LUNDELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 2117 W. GRAMERCY DRIVE

City GREEN VALLEY State AZ Zip Code 85622-5467

FEC ID number of contributing federal political committee. **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 271.00

Date of Receipt: 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03867**

Amount of Each Receipt this Period: 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 596.00

**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 1394 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID J. LUNDQUIST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6277 NORTH OCEAN BLVD.  
 City OCEAN RIDGE State FL Zip Code 33435-5211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03868**  
 Amount of Each Receipt this Period  
 1500.00

**B. MR. JAMES H. LUNDY JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 2195  
 City CLAYPOOL State AZ Zip Code 85532-2195  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03869**  
 Amount of Each Receipt this Period  
 25.00

**C. MR. JAY D. LUSE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 912 SORRELL COURT  
 City LEBANON State IN Zip Code 46052-1996  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE APPRAISER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03870**  
 Amount of Each Receipt this Period  
 170.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1695.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1395 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAY D. LUSE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 912 SORRELL COURT  
 City LEBANON State IN Zip Code 46052-1996  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE APPRAISER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03871**  
 Amount of Each Receipt this Period  
 50.00

**B. MRS. DOROTHY W. LYNCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26695 W. GREEN TREE COURT  
 City OLATHE State KS Zip Code 66061-7319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03872**  
 Amount of Each Receipt this Period  
 1.00

**C. MRS. MARCELLE LYNCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 LAKE ROAD  
 City UPPER SADDLE RIVER State NJ Zip Code 07458-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE PARTNERSHIP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03873**  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 201.00  
**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 1396 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARCELLE LYNCH**  
Full Name (Last, First, Middle Initial)

Mailing Address 20 LAKE ROAD

City UPPER SADDLE RIVER State NJ Zip Code 07458-1606

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE PARTNERSHIP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03874**

Amount of Each Receipt this Period  
 151.00

**B. MRS. EDWINA LYNN**  
Full Name (Last, First, Middle Initial)

Mailing Address 7109 BRIAR COVE DRIVE

City DALLAS State TX Zip Code 75254-2705

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03875**

Amount of Each Receipt this Period  
 101.00

**C. MR. GENE E. LYNN**  
Full Name (Last, First, Middle Initial)

Mailing Address 4423 POINT FOSDICK DRIVE NW  
SUITE 100

City GIG HARBOR State WA Zip Code 98335-1794

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SERVICE DEVELOPER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03876**

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1252.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1397 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. RON LYNN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3378 WASHINGTON AVE

City ORANGE BEACH State AL Zip Code 36561-3188

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03877**

Amount of Each Receipt this Period  
 300.00

**B. MRS. ANN LYONS**  
Full Name (Last, First, Middle Initial)

Mailing Address 3765 RANCH CREST DRIVE

City RENO State NV Zip Code 89509-6871

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

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  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03878**

Amount of Each Receipt this Period  
 300.00

**C. MR. JAMES J. LYONS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1041 LITTLE CYPRESS KEY

City ATLANTIC BEACH State FL Zip Code 32233-4349

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03879**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00

**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 1398 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. QUINN LYZUN**

Mailing Address 91 STRATFORD ROAD

City State Zip Code  
NEEDHAM MA 02492-1455

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
OPIOS INC. PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03880**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. GARY J. MABIE**

Mailing Address 1212 WOOD HOLLOW DRIVE  
APARTMENT 19202

City State Zip Code  
HOUSTON TX 77057-1678

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MILAGRO EXPLORATION OIL & GAS EXECUTIVE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03881**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MRS. GENEVIEVE G. MAC HARG**

Mailing Address 550 W. 6TH ST  
APARTMENT D-49

City State Zip Code  
MOUNTAIN HOME AR 72653-3420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
28947.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03882**

Amount of Each Receipt this Period  
28947.36

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 29697.36

**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 1399 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GORDON D. MAC KAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 109 E. COMSTOCK STREET  
 City OWOSSO State MI Zip Code 48867-3152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INDIAN TRAILS Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03883**  
 Amount of Each Receipt this Period  
 330.00

**B. MR. RICHARD MACARTHUR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 W 31ST STREET SUITE 703  
 City KANSAS CITY State MO Zip Code 64108-3628  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03884**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. W. KENNETH MACARTNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2174 SW WHITEMARSH WAY  
 City PALM CITY State FL Zip Code 34990-5730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03885**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1080.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1400 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. W. KENNETH MACARTNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2174 SW WHITEMARSH WAY  
 City PALM CITY State FL Zip Code 34990-5730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03886**  
 Amount of Each Receipt this Period 500.00

**B. MR. GEORGE R. MACAULAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14100 W. 90TH TERRACE APARTMENT 318  
 City LENEXA State KS Zip Code 66215-5427  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03887**  
 Amount of Each Receipt this Period 200.00

**C. MR. MICHAEL CHARLES MACDONALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23 PITNEY AVENUE  
 City SPRING LAKE State NJ Zip Code 07762-1726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MEDIFAST Occupation C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI03888**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 1401 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. URBAN MACDONALD</b>		Date of Receipt
Mailing Address 1564 GLENGARRY N.		M M / D D / Y Y Y Y Y Y 03 / 20 / 2014
City	State	Zip Code
BLOOMFIELD HILLS	MI	48301-2240
FEC ID number of contributing federal political committee.	<b>C</b>	
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	250.00	
		Amount of Each Receipt this Period
		250.00
Transaction ID : 2014M04L11AI03889		

Full Name (Last, First, Middle Initial) <b>B. MR. JAMES C. MACKENZIE</b>		Date of Receipt
Mailing Address 877 BLOOMCREST DRIVE		M M / D D / Y Y Y Y Y Y 03 / 05 / 2014
City	State	Zip Code
BLOOMFIELD HILLS	MI	48304-2509
FEC ID number of contributing federal political committee.	<b>C</b>	
Name of Employer	Occupation	
SELF - EMPLOYED	MANAGER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	2000.00	
		Amount of Each Receipt this Period
		2000.00
Transaction ID : 2014M04L11AI03890		

Full Name (Last, First, Middle Initial) <b>C. MR. RODERICK MACKENZIE</b>		Date of Receipt
Mailing Address 245 LOCHAN COVE		M M / D D / Y Y Y Y Y Y 03 / 26 / 2014
City	State	Zip Code
ALPHARETTA	GA	30022-7614
FEC ID number of contributing federal political committee.	<b>C</b>	
Name of Employer	Occupation	
THE ODYSSEY MARKETING GROUP	MARKETING/ADVERTISING	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	526.00	
		Amount of Each Receipt this Period
		221.00
Transaction ID : 2014M04L11AI03891		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2471.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1403 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL MACAULEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1016 HOLDEN AVENUE  
 City State Zip Code  
 BIG BEAR CITY CA 92314-9472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PLUMBER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03895**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. DONALD MACCALLUM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 982  
 City State Zip Code  
 WARROAD MN 56763-0982  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI03896**  
 Amount of Each Receipt this Period  
 250.00

**C. MS. ALICE M. MACK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 119 MILLCREEK ROAD  
 APARTMENT H2S  
 City State Zip Code  
 ARDMORE PA 19003-1524  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI03897**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1404 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALEXANDER W. MACKIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 607  
 City WINTHROP State WA Zip Code 98862-0607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PERKINS COLE, LLP Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03898**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. BRUCE G. MACKLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11421 WHIPPOORWILL ROAD  
 City HOUSTON State TX Zip Code 77024-2731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03899**  
 Amount of Each Receipt this Period  
 5000.00

**C. DR. CHARLES J. MACRI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3302 SAUL ROAD  
 City KENSINGTON State MD Zip Code 20895-3237  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer M.F.A. @ GWU Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03900**  
 Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5610.00  
**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 1405 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID C. MADDOX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1507 N. ACACIA AVENUE  
 City Fullerton State CA Zip Code 92831-1204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DAVID C MADDOX Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03901**  
 Amount of Each Receipt this Period 200.00

**B. MR. LARRY MADDOX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4731 BONITA BAY BLVD, # 2104  
 City Bonita Springs State FL Zip Code 34134-6716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NOT EMPLOYED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03902**  
 Amount of Each Receipt this Period 1000.00

**C. MR. A. FORD MADISON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 843 S. ROSEMARY DRIVE  
 City Bryan State TX Zip Code 77802-4351  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03903**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1400.00  
**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 1406 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. A. FORD MADISON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 843 S. ROSEMARY DRIVE  
 City BRYAN State TX Zip Code 77802-4351  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03904**  
 Amount of Each Receipt this Period  
 150.00

**B. MR. FRANCIS A. MADSEN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2493 E. FIELD ROSE DRIVE  
 City HOLLADAY State UT Zip Code 84121-1571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03905**  
 Amount of Each Receipt this Period  
 105.00

**C. MRS. KRISTY J. MADSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5240 E. TURNER AVENUE  
 City FRESNO State CA Zip Code 93727-2601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03906**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	355.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1407 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MILDRED MADSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1370 E. ADOBE WAY  
 City PALM SPRINGS State CA Zip Code 92262-2306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03907**  
 Amount of Each Receipt this Period 75.00

**B. MS. CAITLIN D. MAECK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2103 13TH AVENUE N  
 City GRAND FORKS State ND Zip Code 58203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REALTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03908**  
 Amount of Each Receipt this Period 310.00

**C. MR. ALBERT F. MAGGINI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6476 TIMBER SPRINGS DRIVE  
 City SANTA ROSA State CA Zip Code 95409-5904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03909**  
 Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 535.00  
**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 1408 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALBERT F. MAGGINI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6476 TIMBER SPRINGS DRIVE  
 City State Zip Code  
 SANTA ROSA CA 95409-5904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03910**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. ANTHONY J. MAGINNIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 120 SPRUCE ROAD  
 City State Zip Code  
 AMBLER PA 19002-5411  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 GLOBAL PACKAGING PRINTER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03911**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. JOHN T. MAGNIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 936 ORCHID POINT WAY  
 City State Zip Code  
 VERO BEACH FL 32963-9517  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03912**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**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 1409 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN T. MAGNIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 936 ORCHID POINT WAY  
 City VERO BEACH State FL Zip Code 32963-9517  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03913**  
 Amount of Each Receipt this Period 250.00

**B. MR. JOSEPH DELMA MAHAFFEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 39415 TOM MORRIS ROAD  
 City SCOTTSDALE State AZ Zip Code 85262-2608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03914**  
 Amount of Each Receipt this Period 250.00

**C. MR. CHRISTOPHER A. MAHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8 FARM HILL LANE  
 City MUTTONTOWN State NY Zip Code 11732-1061  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ERNST & YOUNG, L.L.P. Occupation MANAGEMENT CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03915**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**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 1410 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. HELEN A. MAHURIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 W. 107TH STREET  
 APARTMENT 207  
 City KANSAS CITY State MO Zip Code 64114-5917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03916**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. LOUIS JAMES MAIDA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 914 WELSH LANE  
 City JACKSONVILLE State NC Zip Code 28546-7863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNITED STATES MARINE CORPS Occupation FEDERAL CIVIL SERVICE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03917**  
 Amount of Each Receipt this Period  
 65.00

**C. MR. LOUIS JAMES MAIDA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 914 WELSH LANE  
 City JACKSONVILLE State NC Zip Code 28546-7863  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNITED STATES MARINE CORPS Occupation FEDERAL CIVIL SERVICE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03918**  
 Amount of Each Receipt this Period  
 5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 71.00  
**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 1411 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ANITA MAILLOT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 819 SHOSHONE DRIVE  
 City LA CONNER State WA Zip Code 98257-9621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1766.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI03919**  
 Amount of Each Receipt this Period  
 65.00

**B. MRS. ANITA MAILLOT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 819 SHOSHONE DRIVE  
 City LA CONNER State WA Zip Code 98257-9621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1766.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03920**  
 Amount of Each Receipt this Period  
 701.00

**C. MRS. ANITA MAILLOT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 819 SHOSHONE DRIVE  
 City LA CONNER State WA Zip Code 98257-9621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1766.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI03921**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1766.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1412 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. N. R. MAITINO</b>		Date of Receipt
Mailing Address 807 W. ROSES ROAD		M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014
City	State	Zip Code
SAN GABRIEL	CA	91775-2123
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03922
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		120.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	240.00	

Full Name (Last, First, Middle Initial) <b>B. MR. DONALD W. MAKINSON</b>		Date of Receipt
Mailing Address 325 ARAPAHO E.		M M M / D D D / Y Y Y Y Y Y 03 / 21 / 2014
City	State	Zip Code
SHERMAN	TX	75092-7605
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03923
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		110.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	320.00	

Full Name (Last, First, Middle Initial) <b>C. MR. LARRY W. MALACE</b>		Date of Receipt
Mailing Address 4711 OAKHURST RIDGE ROAD		M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014
City	State	Zip Code
CLARKSTON	MI	48348-5048
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI03924
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		500.00
Name of Employer	Occupation	
MALACE & ASSOCIATES	BUSINESS OWNER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	730.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1413 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. JEAN MALANAPHY</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI03925</b>
Mailing Address 4770 N. MOJAVE TERRACE		Amount of Each Receipt this Period 1000.00
City BEVERLY HILLS	State FL	Zip Code 34465-2852
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. MR. EUGENE MALCOLM JR.</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2014 <b>Transaction ID : 2014M04L11AI03926</b>
Mailing Address P.O. BOX 8092		Amount of Each Receipt this Period 90.00
City ATHENS	State GA	Zip Code 30603-8092
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.00	

Full Name (Last, First, Middle Initial) <b>C. MR. EUGENE MALCOLM JR.</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2014 <b>Transaction ID : 2014M04L11AI03927</b>
Mailing Address P.O. BOX 8092		Amount of Each Receipt this Period 81.00
City ATHENS	State GA	Zip Code 30603-8092
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1171.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1414 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL J. MALLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3688 W. 228TH STREET  
 City State Zip Code  
 TORRANCE CA 90505-2668  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BOEING DATABASE ADMINSTRATOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03928**  
 Amount of Each Receipt this Period  
 111.00

**B. MR. MIKE C. MALLOY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 207 BAY BRIDGE DRIVE  
 City State Zip Code  
 SUGAR LAND TX 77478-4739  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03929**  
 Amount of Each Receipt this Period  
 250.00

**C. MS. MARY A. MALONE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 75 OLD STOTTSVILLE ROAD  
 IRON SPRING FARM  
 City State Zip Code  
 COATESVILLE PA 19320-4935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF - EMPLOYED HORSE BREEDER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03930**  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1361.00  
**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 1415 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BROOKS T. MANCINI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 7216  
 City RENO State NV Zip Code 89510-7216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MANCINI PROPERTIES, INC. Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03931**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. CHARLES G. MANDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24 WILCOX PLACE  
 City FAIR LAWN State NJ Zip Code 07410-5516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03932**  
 Amount of Each Receipt this Period  
 140.00

**C. MR. MONTE S. MANEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 FENIMORE ROAD  
 City SCARSDALE State NY Zip Code 10583-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI03933**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 640.00  
**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 1416 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JULIE MANFREDI**  
Full Name (Last, First, Middle Initial)

Mailing Address 201 NORTHAMPTON CT

City CANTON State GA Zip Code 30115-6097

FEC ID number of contributing federal political committee. **C**

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : 2014M04L11AI03934**

Amount of Each Receipt this Period  
**150.00**

**B. MRS. LYNN S. MANGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 8 EAST 81ST STREET

City NEW YORK State NY Zip Code 10028-0201

FEC ID number of contributing federal political committee. **C**

Name of Employer: **NOT EMPLOYED** Occupation: **NOT EMPLOYED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**

**Transaction ID : 2014M04L11AI03935**

Amount of Each Receipt this Period  
**100.00**

**C. MR. DONALD L. MANION**  
Full Name (Last, First, Middle Initial)

Mailing Address 305 WINTHROP TERRACE

City BEDFORD State MA Zip Code 01730-1270

FEC ID number of contributing federal political committee. **C**

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **376.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 26 / 2014**

**Transaction ID : 2014M04L11AI03936**

Amount of Each Receipt this Period  
**201.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>451.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1417 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GENE ARNOLD MANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 116 ROCKET RANCH ROAD  
 City BRANDON State MS Zip Code 39047-9394  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03937**  
 Amount of Each Receipt this Period  
 25.00

**B. MS. MARIAN L. MANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 401 ALMA REAL DRIVE  
 City PACIFIC PALISADES State CA Zip Code 90272-4418  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03938**  
 Amount of Each Receipt this Period  
 1.00

**C. MS. MARIAN L. MANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 401 ALMA REAL DRIVE  
 City PACIFIC PALISADES State CA Zip Code 90272-4418  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03939**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	226.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1418 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARVIN L. MANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 233 PLANTATION CIRCLE S.  
 City State Zip Code  
 PONTE VEDRA FL 32082-3936  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03940**  
 Amount of Each Receipt this Period  
 2000.00

**B. MR. ROBERT LEE MANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4520 DEL RIO ROAD  
 City State Zip Code  
 ROSEBURG OR 97471-9587  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03941**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. MARY O. MANRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 911 CHERRY STREET  
 City State Zip Code  
 UVALDE TX 78801-4801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 701.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03942**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1419 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY O. MANRY**  
Full Name (Last, First, Middle Initial)

Mailing Address 911 CHERRY STREET

City UVALDE State TX Zip Code 78801-4801

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 701.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03943**

Amount of Each Receipt this Period  
 101.00

**B. MR. E. BARRY MANSUR**  
Full Name (Last, First, Middle Initial)

Mailing Address 875 NORTH MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611-1779

FEC ID number of contributing federal political committee. **C**

Name of Employer MANSUR & CO. Occupation REAL ESTATE EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI03944**

Amount of Each Receipt this Period  
 15000.00

**C. MRS. VIRGINIA P. MANTHEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 5437 NOLAN LANE

City OAK PARK HEIGHTS State MN Zip Code 55082-5591

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03945**

Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15301.00

**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 1420 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD MANZO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1310 ARBOR LANE  
 City LAKE FOREST State IL Zip Code 60045-3783  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COOK ALEX MC FARION MAUZO Occupation I.P. LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03946**  
 Amount of Each Receipt this Period  
 400.00

**B. MR. CHAD NICHOLAS MARAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 719 NELSON RANCH ROAD  
 City CEDAR PARK State TX Zip Code 78613-4008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LITTELFUSE INC. Occupation TECHNICAL MARKETING AND PRODUCTION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03947**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. CHAD NICHOLAS MARAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 719 NELSON RANCH ROAD  
 City CEDAR PARK State TX Zip Code 78613-4008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LITTELFUSE INC. Occupation TECHNICAL MARKETING AND PRODUCTION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03948**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1421 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHAD NICHOLAS MARAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 719 NELSON RANCH ROAD  
 City CEDAR PARK State TX Zip Code 78613-4008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LITTELFUSE INC. Occupation TECHNICAL MARKETING AND PRODUCTION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03949**  
 Amount of Each Receipt this Period  
 1.00

**B. DR. ROBERT C. MARCIANO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12369 SD HWY. 1804  
 City MOBRIDGE State SD Zip Code 57601-5014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer M Occupation FAMILY PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI03950**  
 Amount of Each Receipt this Period  
 250.00

**C. DR. WILLIAM MARCIL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 608 MOSS HILL ROAD  
 City HEWITT State TX Zip Code 76643-3351  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VETERANS HEALTH ADMINISTRATION Occupation PHYSICIAN / PSYCHIATRIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03951**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 751.00  
**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 1422 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. CLYDE MARINE**

Mailing Address P.O. BOX 9

City PANOLA                      State AL                      Zip Code 35477-0009

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED                      Occupation REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03952**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. FATON MARKE**

Mailing Address 275 BENNETT AVENUE

City STATEN ISLAND                      State NY                      Zip Code 10312-4057

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED                      Occupation REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03953**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MRS. LAURA MARKSTEIN**

Mailing Address P.O. BOX 54

City DIABLO                      State CA                      Zip Code 94528-0054

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF                      Occupation REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03954**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00

**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 1423 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. STANLEY A. MARKUNAS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 106 BROOKSIDE ROAD  
 City DALTON State PA Zip Code 18414-9203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BURLINGTON FAMILY MECICAL CENTERS Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03955**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. AMY C. MARLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2810 SHERWOOD DRIVE  
 City SAN BRUNO State CA Zip Code 94066-1734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI03955**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. AMY C. MARLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2810 SHERWOOD DRIVE  
 City SAN BRUNO State CA Zip Code 94066-1734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03957**  
 Amount of Each Receipt this Period  
 65.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	215.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1424 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS MAROTTA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 427  
 City MONTVILLE State NJ Zip Code 07045-0427  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MAROTTA CONTROLS INC. Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03958**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. TED MARQUAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3804 W LOGAN AVE  
 City YAKIMA State WA Zip Code 98902-4831  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03959**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. IONEL MARSVELA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1548  
 City LOMA LINDA State CA Zip Code 92354-1548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer S.B. LOGISTIC Occupation TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03960**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 420.00  
**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 1425 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. IONEL MARSAVELA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1548  
 City LOMA LINDA State CA Zip Code 92354-1548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer S.B. LOGISTIC Occupation TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03961**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. FRED E. MARSH JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10108 TAN RARA DRIVE  
 City KNOXVILLE State TN Zip Code 37922-4141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03962**  
 Amount of Each Receipt this Period  
 110.00

**C. MR. GEOFFREY S. MARSH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4450 MONAHAN ROAD  
 City LAMESA State CA Zip Code 91941-7030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03963**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 460.00  
**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 1426 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID MARSHALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2171 MADISON AVENUE  
 APARTMENT 12-D  
 City NEW YORK State NY Zip Code 10037-2328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CONSOLIDATED EDISON COMPANY OF N.Y. Occupation ANALYST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03964**  
 Amount of Each Receipt this Period  
 90.00

**B. MS. JULIE MARSHALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1900 N. SPRUCE STREET  
 City LITTLE ROCK State AR Zip Code 72207-4718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. ABLE LIFE Occupation EXECUTIVE VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI03965**  
 Amount of Each Receipt this Period  
 900.00

**C. MRS. DONNA MARSHALLNAIL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 FAIRGROUND ROAD  
 City WOODSTOCK State VA Zip Code 22664-1102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03966**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1110.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1427 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. THOMAS H. MARSICANO**  
Full Name (Last, First, Middle Initial)

Mailing Address 1116 WILMINGTON ISLAND ROAD

City SAVANNAH State GA Zip Code 31410-4509

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI03967**

Amount of Each Receipt this Period  
 500.00

**B. MR. THOMAS MARTEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 MELVILLE WALK

City HINGHAM State MA Zip Code 02043-1349

FEC ID number of contributing federal political committee. **C**

Name of Employer CIGNA CORP. Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03968**

Amount of Each Receipt this Period  
 201.00

**C. MS. NANCY L. MARTELLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 2411 SKYLARK COURT

City CHARLOTTE State NC Zip Code 28210-6749

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03969**

Amount of Each Receipt this Period  
 220.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 921.00

**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 1428 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. CAROLE A. MARTIN**

Mailing Address 29749 GLENEAGLES ROAD

City State Zip Code  
PERRYSBURG OH 43551-3519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03970**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. MR. CHRISTOPHER CAREY MARTIN**

Mailing Address 2794 CARLARIS ROAD

City State Zip Code  
SAN MARINO CA 91108-1715

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
AC MARTIN PARTNERS, INC. ARCHITECT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03971**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. MR. CLINTON E. MARTIN**

Mailing Address 229 PATTON FARM ROAD

City State Zip Code  
STUARTS DRAFT VA 24477-2610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED FARMER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03972**

Amount of Each Receipt this Period  
210.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 510.00

**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 1429 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. DAVID C. MARTIN JR.</b>		Date of Receipt 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI03973</b>
Mailing Address 4131 MCCABE AVENUE N.E.		Amount of Each Receipt this Period 110.00
City ADA	State MI	
Zip Code 49301-9737		Aggregate Year-to-Date ▼ 765.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. MR. DENNIS P. MARTIN</b>		Date of Receipt 03 / 04 / 2014 <b>Transaction ID : 2014M04L11AI03974</b>
Mailing Address 25 FORESTWOOD DRIVE		Amount of Each Receipt this Period 1000.00
City ROMEDEVILLE	State IL	
Zip Code 60446-1343		Aggregate Year-to-Date ▼ 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer MARTIN CEMELE COMPANY	Occupation SALES	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. MR. DONALD MARTIN</b>		Date of Receipt 03 / 17 / 2014 <b>Transaction ID : 2014M04L11AI03975</b>
Mailing Address 907 CUMBERLAND RIDGE		Amount of Each Receipt this Period 150.00
City OXFORD	State MS	
Zip Code 38655-9231		Aggregate Year-to-Date ▼ 301.00
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation CONSULTANT	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1260.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1430 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD MARTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 907 CUMBERLAND RIDGE  
 City OXFORD State MS Zip Code 38655-9231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03976**  
 Amount of Each Receipt this Period 151.00

**B. MRS. DOROTHY M. MARTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 WHITE OAK DRIVE APARTMENT 202  
 City EXETER State NH Zip Code 03833-5313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI03977**  
 Amount of Each Receipt this Period 300.00

**C. MR. DWIGHT MARTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2834 W. KINGSLEY ROAD  
 City GARLAND State TX Zip Code 75041-2408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03978**  
 Amount of Each Receipt this Period 330.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 781.00  
**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 1431 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GARY O. MARTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8605 AMESTOY AVENUE  
 City NORTHRIDGE State CA Zip Code 91325-3405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI03979**  
 Amount of Each Receipt this Period 250.00

**B. MR. JAMES MARTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4905 CATAWBA DRIVE  
 City GREENSBORO State NC Zip Code 27407-7755  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03980**  
 Amount of Each Receipt this Period 250.00

**C. MR. JAMES H. MARTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14111 W. YOSEMITE DRIVE  
 City SUN CITY WEST State AZ Zip Code 85375-5646  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI03981**  
 Amount of Each Receipt this Period 251.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 751.00  
**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 1432 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. JOE P. MARTIN</b>		Date of Receipt
Mailing Address P.O. BOX 25527		M M M / D D D / Y Y Y Y Y Y 03 / 03 / 2014
City	State	Zip Code
ALEXANDRIA	VA	22313-5527
FEC ID number of contributing federal political committee.	Transaction ID : <b>2014M04L11AI03982</b>	
	Amount of Each Receipt this Period	
	120.00	
Name of Employer	Occupation	
SELF - EMPLOYED	ATTORNEY	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	220.00	

Full Name (Last, First, Middle Initial) <b>B. MR. MARK M. MARTIN</b>		Date of Receipt
Mailing Address 714 NORRINGTON MEADOW		M M M / D D D / Y Y Y Y Y Y 03 / 12 / 2014
City	State	Zip Code
FENTON	MO	63026-3563
FEC ID number of contributing federal political committee.	Transaction ID : <b>2014M04L11AI03983</b>	
	Amount of Each Receipt this Period	
	120.00	
Name of Employer	Occupation	
P. M. I.	MEDICAL SALES	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	240.00	

Full Name (Last, First, Middle Initial) <b>C. DR. RANDALL P. MARTIN</b>		Date of Receipt
Mailing Address 6105 WOODLAKE DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 27 / 2014
City	State	Zip Code
ARLINGTON	TX	76016-2056
FEC ID number of contributing federal political committee.	Transaction ID : <b>2014M04L11AI03984</b>	
	Amount of Each Receipt this Period	
	500.00	
Name of Employer	Occupation	
ANESTHESIA ASSOCIATION, P.A.	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	740.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1433 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. RHONDA MARTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8438 OXFORD CHASE CIRCLE NW  
 City MASSILLON State OH Zip Code 44646-7871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03985**  
 Amount of Each Receipt this Period  
 750.00

**B. MR. WILLIAM L. MARTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3501 BAYSHORE BLVD. #903  
 City TAMPA State FL Zip Code 33629-8901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI03986**  
 Amount of Each Receipt this Period  
 225.00

**C. MR. WILLIAM L. MARTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3501 BAYSHORE BLVD. #903  
 City TAMPA State FL Zip Code 33629-8901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI03987**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1025.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1434 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STANLEY J. MARTINKUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 208 OBSERVATION DRIVE  
 City YAKIMA State WA Zip Code 98901-1648  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WESTERN MATERIALS INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03988**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. KENNETH F. MARTINO JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 FAIRWAY XING  
 City GLASTONBURY State CT Zip Code 06033-1466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE HARTFORD Occupation INSURANCE  
 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  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI03989**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. ANDREW A. MARVIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 914 FAIRVIEW AVENUE  
 City EPHRATA State PA Zip Code 17522-1319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI03990**  
 Amount of Each Receipt this Period  
 65.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 615.00  
**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 1435 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ANDREW A. MARVIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 914 FAIRVIEW AVENUE  
 City EPHRATA State PA Zip Code 17522-1319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI03991**  
 Amount of Each Receipt this Period 70.00

**B. MR. WILLIAM S. MARX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1509 SOUTHWICK ROAD  
 City VIRGINIA BEACH State VA Zip Code 23451-5965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NEXCOM Occupation BUYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI03992**  
 Amount of Each Receipt this Period 50.00

**C. MR. WILLIAM S. MARX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1509 SOUTHWICK ROAD  
 City VIRGINIA BEACH State VA Zip Code 23451-5965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NEXCOM Occupation BUYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI03993**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 170.00  
**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 1436 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. DR. PAOLO MASETTI</b>		Date of Receipt
Mailing Address 848 CARILLON COURT		M M M / D D D / Y Y Y Y Y Y 03 / 04 / 2014
City	State	Zip Code
CREVE COEUR	MO	63141-6316
FEC ID number of contributing federal political committee.	Transaction ID : 2014M04L11AI03994	
	Amount of Each Receipt this Period	
	25.00	
Name of Employer	Occupation	
L. P. C. ST. LOUIS	M.D.	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	260.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. DR. PAOLO MASETTI</b>		Date of Receipt
Mailing Address 848 CARILLON COURT		M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014
City	State	Zip Code
CREVE COEUR	MO	63141-6316
FEC ID number of contributing federal political committee.	Transaction ID : 2014M04L11AI03995	
	Amount of Each Receipt this Period	
	25.00	
Name of Employer	Occupation	
L. P. C. ST. LOUIS	M.D.	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	260.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. DR. PAOLO MASETTI</b>		Date of Receipt
Mailing Address 848 CARILLON COURT		M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014
City	State	Zip Code
CREVE COEUR	MO	63141-6316
FEC ID number of contributing federal political committee.	Transaction ID : 2014M04L11AI03996	
	Amount of Each Receipt this Period	
	30.00	
Name of Employer	Occupation	
L. P. C. ST. LOUIS	M.D.	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	260.00	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1437 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LYLE MASON**  
Full Name (Last, First, Middle Initial)

Mailing Address 35995 ROYAL SAGE COURT

City PALM DESERT State CA Zip Code 92211-2717

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03997**

Amount of Each Receipt this Period  
 500.00

**B. MR. MATTHEW MASON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2320 S. STOWE ROAD

City VIRGINIA BEACH State VA Zip Code 23457-1409

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03998**

Amount of Each Receipt this Period  
 100.00

**C. MR. MATTHEW MASON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2320 S. STOWE ROAD

City VIRGINIA BEACH State VA Zip Code 23457-1409

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI03999**

Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 601.00

**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 1438 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEVEN C. MASON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4418 MORaine RIDGE LANE  
 City KETTERING State OH Zip Code 45429-1106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04000**  
 Amount of Each Receipt this Period  
 1000.00

**B. DR. WILLIAM EDWARD MASON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 382 CANTERBURY DRIVE  
 City SAGINAW State MI Zip Code 48638-5811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04001**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. CARL L. MASTER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3944 REGAL COURT  
 City VIRGINIA BEACH State VA Zip Code 23452-3839  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04002**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1351.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1439 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. RUTH MASTERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 ROYAL DALTON CIRCLE  
 City CONROE State TX Zip Code 77304-9719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04003**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. JAMES M. MASTRONARDI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 140 SHORE VISTA LANE  
 City GREER State SC Zip Code 29651-5080  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04004**  
 Amount of Each Receipt this Period  
 1501.00

**C. MRS. CLARA L. MATHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1309 N. EVERGREEN ROAD  
 APARTMENT 1A  
 City SPOKANE VALLEY State WA Zip Code 99216-3714  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 396.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04005**  
 Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1611.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1440 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. CLARA L. MATHER</b>		Date of Receipt
Mailing Address 1309 N. EVERGREEN ROAD APARTMENT 1A		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
SPOKANE VALLEY	WA	99216-3714
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI04006</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="396.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="396.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MRS. CLARA L. MATHER</b>		Date of Receipt
Mailing Address 1309 N. EVERGREEN ROAD APARTMENT 1A		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code
SPOKANE VALLEY	WA	99216-3714
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI04007</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="35.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="396.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MRS. CLARA L. MATHER</b>		Date of Receipt
Mailing Address 1309 N. EVERGREEN ROAD APARTMENT 1A		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
SPOKANE VALLEY	WA	99216-3714
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI04008</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="396.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="115.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 1441 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CLARA L. MATHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1309 N. EVERGREEN ROAD  
 APARTMENT 1A  
 City SPOKANE VALLEY State WA Zip Code 99216-3714  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 396.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04009**  
 Amount of Each Receipt this Period 1.00

**B. MR. ALFRED L. MATHEWS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 111 BUCK ROAD  
 City WILMINGTON State DE Zip Code 19807-2111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04010**  
 Amount of Each Receipt this Period 36.00

**C. MR. DAVID MATHEWS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N51W27666 N. WILLOW CREEK DRIVE  
 City PEWAUKEE State WI Zip Code 53072-1018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04011**  
 Amount of Each Receipt this Period 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 38.00  
**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 1442 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARTHA A. MATHIAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 737 N. STATE ROAD 227  
 City UNION CITY State IN Zip Code 47390-8420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FRANK MILLER LUMBER COMPANY Occupation PRESIDENT/C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04012**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. GAIL B. MATTHEWS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 MOUNT HOLYOKE  
 City RANCHO MIRAGE State CA Zip Code 92270-3667  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04013**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. DIANE S. MATTLY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 196  
 City BARKER State TX Zip Code 77413-0196  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04014**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00  
**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 1443 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEPHEN C. MATULA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3713 S. GEORGE MASON DR., 813W  
 APARTMENT 813W  
 City FALLS CHURCH State VA Zip Code 22041-3770  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04015**  
 Amount of Each Receipt this Period 100.00

**B. MRS. MARIA CANDIDA MATZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16040 E. STATE FAIR STREET  
 City DETROIT State MI Zip Code 48205-2035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04016**  
 Amount of Each Receipt this Period 110.00

**C. MRS. MARIA CANDIDA MATZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16040 E. STATE FAIR STREET  
 City DETROIT State MI Zip Code 48205-2035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04017**  
 Amount of Each Receipt this Period 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 320.00  
**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 1444 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANK MAURAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 22 PARSONAGE STREET

City Providence State RI Zip Code 02903-4732

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation MEDIA SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04018**

Amount of Each Receipt this Period  
 500.00

**B. MR. FRANK MAURAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 22 PARSONAGE STREET

City Providence State RI Zip Code 02903-4732

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation MEDIA SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04019**

Amount of Each Receipt this Period  
 500.00

**C. MR. FRANK MAURAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 22 PARSONAGE STREET

City Providence State RI Zip Code 02903-4732

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation MEDIA SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04020**

Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1445 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DENNIS H. MAVES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13351 W. ALAMEDA PARKWAY  
 City LAKEWOOD State CO Zip Code 80228-3453  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04021**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. FRANCIS MAWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35 ESSEX STREET  
 City LAWRENCE State MA Zip Code 01840-1709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CORPUS CHRISTI PARISH Occupation PRIEST  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04022**  
 Amount of Each Receipt this Period  
 300.00

**C. MS. MARIETTA M. MAXFIELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11415 HOLIDAN WAY  
 City HOUSTON State TX Zip Code 77024-2706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04023**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00  
**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 1446 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. BRYAN MAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7321 SERAPHIM CT.  
 City State Zip Code  
 GALENA OH 43021-6003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF DENTIST  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04024**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. EDWARD L. MAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8623 GALATIN COURT NW  
 City State Zip Code  
 ALBUQUERQUE NM 87120-2396  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04025**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. FRANK MAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 701 PECAN HILL DRIVE  
 City State Zip Code  
 SAINT CHARLES MO 63304-5086  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED MANUFACTURER'S REP  
 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  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04026**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1447 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANK MAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 701 PECAN HILL DRIVE  
 City SAINT CHARLES State MO Zip Code 63304-5086  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MANUFACTURER'S REP  
 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  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04027**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. MICHAEL B. MAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3304 RHODES AVENUE APARTMENT 128  
 City NEW BOSTON State OH Zip Code 45662-4914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04028**  
 Amount of Each Receipt this Period  
 30.00

**C. MR. MICHAEL B. MAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3304 RHODES AVENUE APARTMENT 128  
 City NEW BOSTON State OH Zip Code 45662-4914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04029**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	155.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1448 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL B. MAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3304 RHODES AVENUE  
 APARTMENT 128  
 City NEW BOSTON State OH Zip Code 45662-4914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04030**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. MICHAEL B. MAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3304 RHODES AVENUE  
 APARTMENT 128  
 City NEW BOSTON State OH Zip Code 45662-4914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04031**  
 Amount of Each Receipt this Period  
 30.00

**C. MR. MICHAEL B. MAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3304 RHODES AVENUE  
 APARTMENT 128  
 City NEW BOSTON State OH Zip Code 45662-4914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04032**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 105.00  
**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 1449 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SHERMAN C. MAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4704 JUMANO AVENUE  
 City SAN DIEGO State CA Zip Code 92117-6216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04033**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. ALLAN C. MAYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23005 N. 74TH STREET UNIT 4036  
 City SCOTTSDALE State AZ Zip Code 85255-7521  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04034**  
 Amount of Each Receipt this Period  
 501.00

**C. MS. CAROL MAYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18785 DAVIDSON ROAD  
 City BROOKFIELD State WI Zip Code 53045-6614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04035**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	671.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1450 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. JOHN MAYER</b>		Date of Receipt										
Mailing Address 1810 N. NELSON AVENUE		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>31</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	31	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	31	/	2014								
City	State	Zip Code										
WILMINGTON	OH	45177-9094										
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>											
Name of Employer	Occupation											
SELF-EMPLOYED	OWNER											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>											
		Transaction ID : 2014M04L11AI04036										
		Amount of Each Receipt this Period										
		<input type="text" value="1000.00"/>										

Full Name (Last, First, Middle Initial) <b>B. MR. ROBERT MAYER</b>		Date of Receipt										
Mailing Address 9 ADAMS DRIVE		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>25</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	25	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	25	/	2014								
City	State	Zip Code										
DEXTER	MO	63841-1985										
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>											
Name of Employer	Occupation											
RETIRED	RETIRED											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="202.00"/>											
		Transaction ID : 2014M04L11AI04037										
		Amount of Each Receipt this Period										
		<input type="text" value="102.00"/>										

Full Name (Last, First, Middle Initial) <b>C. JIM MAYES</b>		Date of Receipt										
Mailing Address 290 SALEM STREET		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>24</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	24	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	24	/	2014								
City	State	Zip Code										
MAYESVILLE	SC	29104-8941										
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>											
Name of Employer	Occupation											
SOUTHERN CROSS UNDERWRITERS	INSURANCE BROKER											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>											
		Transaction ID : 2014M04L11AI04038										
		Amount of Each Receipt this Period										
		<input type="text" value="300.00"/>										

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1402.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 1451 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID MAYFIELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 416 TYLER STREET  
 City TAFT State CA Zip Code 93268-1720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04039**  
 Amount of Each Receipt this Period  
 151.00

**B. MR. JESS L. MAYFIELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 440 MORNINGSIDE DRIVE  
 City SAN ANTONIO State TX Zip Code 78209-2802  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer S.O.S. COMPANIES Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04040**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. RONALD EDWARD MAYNE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7406 37TH AVENUE  
 City MOLINE State IL Zip Code 61265-8025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MACHINIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04041**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	501.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1452 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD EDWARD MAYNE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7406 37TH AVENUE  
 City Moline State IL Zip Code 61265-8025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MACHINIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI0402**  
 Amount of Each Receipt this Period 75.00

**B. MR. RONALD EDWARD MAYNE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7406 37TH AVENUE  
 City Moline State IL Zip Code 61265-8025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MACHINIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI0403**  
 Amount of Each Receipt this Period 100.00

**C. MR. JOHN MAZURKIEWICZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29321 CENTERFIELD  
 City Lake Elsinore State CA Zip Code 92530-4679  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI0404**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶  
**TOTAL** This Period (last page this line number only)..... ▶

275.00

**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 1453 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DONNA PFEIFER MC DONALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address POST OFFICE BOX 5129  
 City SLIDELL State LA Zip Code 70469-5129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MCDONALD CONSTRUCTION INC OF SLIDEL Occupation CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04045**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. RICHARD G. MC DONALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15805 EDGEWOOD DRIVE  
 City DUMFRIES State VA Zip Code 22025-1726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. GOVERNMENT Occupation ANALYST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04046**  
 Amount of Each Receipt this Period  
 135.00

**C. MR. THOMAS S. MC DONALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2419 BAYVIEW AVE  
 City WANTAGH State NY Zip Code 11793-4303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NASSAU COUNTY DISTRICT ATTORNEY'S O Occupation DETECTIVE/INVESTIGATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04047**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1185.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1454 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. L. L. MCALLISTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 COVEY CHASE  
 City TUSCALOOSA State AL Zip Code 35406-1801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CORAL INDUSTRIES, INC. Occupation CORPORATE EXECUTIVE  
 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  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04048**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. T. ALLAN MCARTOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 FALCON RIDGE ROAD  
 City GREAT FALLS State VA Zip Code 22066-3519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AIRBUS GROUP, INC. Occupation CHAIRMAN & C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04049**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. SEAN M. MCAVOY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1005 VISTA ROAD  
 City HILLSBOROUGH State CA Zip Code 94010-7258  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HILLAIN CAPITAL L.L.C. Occupation MONEY MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04050**  
 Amount of Each Receipt this Period  
 32400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 33520.00  
**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 1455 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CLAIRE MCBRIDE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 235  
 City ROSS State CA Zip Code 94957-0235  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04051**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. PETER L. MCCALL JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3316 SOCIETY HILL ROAD  
 City SOCIETY HILL State SC Zip Code 29593-8201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04052**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. PETER L. MCCALL JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3316 SOCIETY HILL ROAD  
 City SOCIETY HILL State SC Zip Code 29593-8201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04053**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	451.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1456 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LARRY D. MCCARROLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4525 SOUTH ATLANTIC AVENUE  
 City PONCE INLET State FL Zip Code 32127-7056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. AIRWAYS Occupation PILOT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 471.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04054**  
 Amount of Each Receipt this Period 110.00

**B. MR. LARRY D. MCCARROLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4525 SOUTH ATLANTIC AVENUE  
 City PONCE INLET State FL Zip Code 32127-7056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. AIRWAYS Occupation PILOT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 471.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04055**  
 Amount of Each Receipt this Period 251.00

**C. MRS. MARTHA MCCARTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2023 LEMONBERRY LANE  
 City CARLSBAD State CA Zip Code 92009-6884  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1090.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04056**  
 Amount of Each Receipt this Period 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 416.00  
**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 1457 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARTHA MCCARTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2023 LEMONBERRY LANE  
 City CARLSBAD State CA Zip Code 92009-6884  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1090.00**

Date of Receipt: **03 / 11 / 2014**  
**Transaction ID : 2014M04L11AI04057**  
 Amount of Each Receipt this Period: **1000.00**

**B. MR. VERNON C. MCCARTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4610 NW COUNTY ROAD 2030  
 City CORSICANA State TX Zip Code 75110-6065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **REQUESTED** Occupation: **REQUESTED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **201.00**

Date of Receipt: **03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI04058**  
 Amount of Each Receipt this Period: **200.00**

**C. MR. VERNON C. MCCARTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4610 NW COUNTY ROAD 2030  
 City CORSICANA State TX Zip Code 75110-6065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **REQUESTED** Occupation: **REQUESTED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **201.00**

Date of Receipt: **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI04059**  
 Amount of Each Receipt this Period: **1.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1201.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1458 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. R. KENT MCCARTHY**  
Full Name (Last, First, Middle Initial)

Mailing Address 14617 N. 9TH STREET

City PHOENIX State AZ Zip Code 85022-3781

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

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  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04060**

Amount of Each Receipt this Period  
 100.00

**B. MR. R. KENT MCCARTHY**  
Full Name (Last, First, Middle Initial)

Mailing Address 14617 N. 9TH STREET

City PHOENIX State AZ Zip Code 85022-3781

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

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  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04061**

Amount of Each Receipt this Period  
 100.00

**C. MR. CHARLES MCCARTY**  
Full Name (Last, First, Middle Initial)

Mailing Address 409 SHADOWOOD DRIVE

City MARSHALL State TX Zip Code 75672-1317

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04062**

Amount of Each Receipt this Period  
 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	230.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1459 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MAX MCCARTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 MANCHESTER DRIVE  
 City NEWNAN State GA Zip Code 30265-1916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04063**  
 Amount of Each Receipt this Period  
 31.00

**B. MR. MAX MCCARTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 MANCHESTER DRIVE  
 City NEWNAN State GA Zip Code 30265-1916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04064**  
 Amount of Each Receipt this Period  
 45.00

**C. MR. CHARLES H. MCCAULEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 832 PARK PLACE  
 City WILLISTON State ND Zip Code 58801-4054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04065**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	176.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1460 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES MCCLAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7113 DOSWELL LANE  
 City AUSTIN State TX Zip Code 78739-2042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MOTOROLA Occupation PROGRAM MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04066**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. AUDREY Z. MCCLELLAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2009 N. PARKER DRIVE  
 City JANESVILLE State WI Zip Code 53545-0759  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04067**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. AUDREY Z. MCCLELLAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2009 N. PARKER DRIVE  
 City JANESVILLE State WI Zip Code 53545-0759  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04068**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1461 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM MCCLENDON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2107 RUSS SRTEET  
 City EUREKA State CA Zip Code 95501-4719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04069**  
 Amount of Each Receipt this Period  
 45.00

**B. MR. WILLIAM MCCLENDON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2107 RUSS SRTEET  
 City EUREKA State CA Zip Code 95501-4719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04070**  
 Amount of Each Receipt this Period  
 35.00

**C. MR. WILLIAM F. MCCLINTOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1583 E. 2ND STREET  
 City SCOTCH PLAINS State NJ Zip Code 07076-1627  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04071**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 180.00  
**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 1462 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BOB MCCLOSKEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3681 SE FAIRWAY W  
 City STUART State FL Zip Code 34997-6035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04072**  
 Amount of Each Receipt this Period  
 276.00

**B. MR. LESTER DWAYNE MCCLURE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 126 MC CLURE ROAD  
 City GILLSVILLE State GA Zip Code 30543-4620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04073**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. EDWIN W. MCCONNELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. DRAWER 16508  
 City MOBILE State AL Zip Code 36616-0508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MC CONNELL AUTOMOTIVE CORPORATION Occupation AUTOMOTIVE DEALER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04074**  
 Amount of Each Receipt this Period  
 201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	577.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1463 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KEITH W. MCCORMICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2521 LAUGHLIN AVENUE  
 City LA CRESCENTA State CA Zip Code 91214-3028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04075**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. JAMES N. MCCOY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5001 DITTO LANE  
 City WICHITA FALLS State TX Zip Code 76302-3501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ECHMETER COMPANY Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04076**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. PAUL MERLE MCCOY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16332 BAWTRY COURT  
 City BOWIE State MD Zip Code 20715-4367  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04077**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 601.00  
**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 1464 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARK MCCRAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4627 FAIRFIELD DRIVE  
 City CORONA DEL MAR State CA Zip Code 92625-3110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04078**  
 Amount of Each Receipt this Period  
 1000.00

**B. MS. ELIZABETH MCCREIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 63 BROOKGREEN CIRCLE S.  
 City MONTGOMERY State TX Zip Code 77356-8361  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04079**  
 Amount of Each Receipt this Period  
 220.00

**C. MRS. SHIRLEY MCCULLOUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 916 S. 1ST AVENUE  
 City BROKEN BOW State NE Zip Code 68822-3004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04080**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1270.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1465 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. WILMA MASH MCCULLOUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 728 E. WASHINGTON STREET  
 City SHREVEPORT State LA Zip Code 71104-3705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04081**  
 Amount of Each Receipt this Period  
 20.00

**B. MS. WILMA MASH MCCULLOUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 728 E. WASHINGTON STREET  
 City SHREVEPORT State LA Zip Code 71104-3705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04082**  
 Amount of Each Receipt this Period  
 30.00

**C. MS. WILMA MASH MCCULLOUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 728 E. WASHINGTON STREET  
 City SHREVEPORT State LA Zip Code 71104-3705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04083**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.00  
**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 1466 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. WILMA MASH MCCULLOUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 728 E. WASHINGTON STREET  
 City SHREVEPORT State LA Zip Code 71104-3705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04084**  
 Amount of Each Receipt this Period  
 25.00

**B. MS. WILMA MASH MCCULLOUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 728 E. WASHINGTON STREET  
 City SHREVEPORT State LA Zip Code 71104-3705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04085**  
 Amount of Each Receipt this Period  
 20.00

**C. MS. WILMA MASH MCCULLOUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 728 E. WASHINGTON STREET  
 City SHREVEPORT State LA Zip Code 71104-3705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04086**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 46.00  
**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 1467 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. WILMA MASH MCCULLOUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 728 E. WASHINGTON STREET  
 City SHREVEPORT State LA Zip Code 71104-3705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04087**  
 Amount of Each Receipt this Period 300.00

**B. MRS. CAROLYN C. MCDANIEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 218 SAMARITAN LANE  
 City MOSCOW State ID Zip Code 83843-8552  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 421.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04088**  
 Amount of Each Receipt this Period 100.00

**C. MRS. CAROLYN C. MCDANIEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 218 SAMARITAN LANE  
 City MOSCOW State ID Zip Code 83843-8552  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 421.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04089**  
 Amount of Each Receipt this Period 111.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 241.00  
**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 1468 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GLENN V. MCDANIEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 536 IRVING ADAMS DRIVE  
 P.O. BOX 381  
 City CHATOM State AL Zip Code 36518-0381  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04090**  
 Amount of Each Receipt this Period  
 225.00

**B. MR. KEN MCDANIEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 744 SHERWOOD ROAD NE  
 City ATLANTA State GA Zip Code 30324-5229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04091**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. LORETTA MCDANIEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1601 S. NELSON STREET  
 City KENNEWICK State WA Zip Code 99338-1418  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04092**  
 Amount of Each Receipt this Period  
 65.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 540.00  
**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 1469 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. B. C. MCDONALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 357  
 City NATALIA State TX Zip Code 78059-0357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04093**  
 Amount of Each Receipt this Period  
 50.00

**B. B. C. MCDONALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 357  
 City NATALIA State TX Zip Code 78059-0357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04094**  
 Amount of Each Receipt this Period  
 150.00

**C. MR. ERNEST JACK MCDONALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 213 BEAR CREEK LANE  
 City GEORGETOWN State TX Zip Code 78633-4125  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04095**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 1470 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HAROLD M. MCDONALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1924 MARCONI CIRCLE  
 City State Zip Code  
 ANNAPOLIS MD 21401-6851  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 282.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04096**  
 Amount of Each Receipt this Period  
 85.00

**B. MR. HAROLD M. MCDONALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1924 MARCONI CIRCLE  
 City State Zip Code  
 ANNAPOLIS MD 21401-6851  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 282.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04097**  
 Amount of Each Receipt this Period  
 85.00

**C. MR. HAROLD M. MCDONALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1924 MARCONI CIRCLE  
 City State Zip Code  
 ANNAPOLIS MD 21401-6851  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 282.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04098**  
 Amount of Each Receipt this Period  
 57.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 227.00  
**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 1471 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SUZANNE MCDONALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 580 HARMON STREET  
 City BIRMINGHAM State MI Zip Code 48009-3820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt: **03 / 20 / 2014**  
**Transaction ID : 2014M04L11AI04099**  
 Amount of Each Receipt this Period: **250.00**

**B. MS. CLARETTA K. MCELROY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 13064  
 City ODESSA State TX Zip Code 79768-3064  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **SELF-EMPLOYED** Occupation: **BUSINESS OWNER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **320.00**

Date of Receipt: **03 / 18 / 2014**  
**Transaction ID : 2014M04L11AI04100**  
 Amount of Each Receipt this Period: **100.00**

**C. MR. HOWARD W. MCELROY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 542  
 City YORKTOWN State TX Zip Code 78164-0542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **SELF-EMPLOYED** Occupation: **C.P.A.**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **220.00**

Date of Receipt: **03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI04101**  
 Amount of Each Receipt this Period: **120.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **470.00**  
**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 1472 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. PATRIC B. MCELWAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3070 SMOKEY ROAD  
 UNIT 17B  
 City PRESCOTT State AZ Zip Code 86301-4604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EMBRY-RIDDLE AEROMARTICAL UNIVERSIT Occupation UNIVERSITY PROFESSOR  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **326.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04102**  
 Amount of Each Receipt this Period  
**35.00**

**B. DR. PATRIC B. MCELWAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3070 SMOKEY ROAD  
 UNIT 17B  
 City PRESCOTT State AZ Zip Code 86301-4604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EMBRY-RIDDLE AEROMARTICAL UNIVERSITY Occupation UNIVERSITY PROFESSOR  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **326.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04103**  
 Amount of Each Receipt this Period  
**35.00**

**C. DR. PATRIC B. MCELWAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3070 SMOKEY ROAD  
 UNIT 17B  
 City PRESCOTT State AZ Zip Code 86301-4604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EMBRY-RIDDLE AEROMARTICAL UNIVERSIT Occupation UNIVERSITY PROFESSOR  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **326.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04104**  
 Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... **120.00**  
**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 1473 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. PATRIC B. MCELWAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3070 SMOKEY ROAD  
 UNIT 17B  
 City PRESCOTT State AZ Zip Code 86301-4604  
 Name of Employer EMBRY-RIDDLE AEROMARTICAL UNIVERSIT Occupation UNIVERSITY PROFESSOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 326.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04105**  
 Amount of Each Receipt this Period 36.00

**B. MR. THOMAS MCELYEA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6833 GLENMEADOW  
 City FORT WORTH State TX Zip Code 76132-3735  
 Name of Employer SID RICHARDSON CARBON COMPANY Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04106**  
 Amount of Each Receipt this Period 1000.00

**C. MR. FRANK G. MCFADDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16 N. MAPLE STREET  
 APARTMENT E1  
 City WOODBURY State NJ Zip Code 08096-2585  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI04107**  
 Amount of Each Receipt this Period 45.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1081.00  
**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 1474 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANK G. MCFADDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16 N. MAPLE STREET  
 APARTMENT E1  
 City WOODBURY State NJ Zip Code 08096-2585  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04108**  
 Amount of Each Receipt this Period 45.00

**B. MRS. OLIVIA S. MCFADDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11011 N. ZEPHYR DRIVE #111  
 City FOUNTAIN HILLS State AZ Zip Code 85268-5505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04109**  
 Amount of Each Receipt this Period 100.00

**C. MRS. OLIVIA S. MCFADDEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11011 N. ZEPHYR DRIVE #111  
 City FOUNTAIN HILLS State AZ Zip Code 85268-5505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04110**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 395.00  
**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 1475 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. OLIVIA S. MCFADDEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 11011 N. ZEPHYR DRIVE #111

City FOUNTAIN HILLS State AZ Zip Code 85268-5505

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04111**

Amount of Each Receipt this Period  
 250.00

**B. MR. HOWARD M. MCFARLAND**  
Full Name (Last, First, Middle Initial)

Mailing Address 326 E. WALNUT STREET

City WESTERVILLE State OH Zip Code 43081-2343

FEC ID number of contributing federal political committee. **C**

Name of Employer JONES LANG LASALLE Occupation MAINTENANCE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04112**

Amount of Each Receipt this Period  
 30.00

**C. MR. HOWARD M. MCFARLAND**  
Full Name (Last, First, Middle Initial)

Mailing Address 326 E. WALNUT STREET

City WESTERVILLE State OH Zip Code 43081-2343

FEC ID number of contributing federal political committee. **C**

Name of Employer JONES LANG LASALLE Occupation MAINTENANCE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI04113**

Amount of Each Receipt this Period  
 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	310.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1476 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HOWARD M. MCFARLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 326 E. WALNUT STREET  
 City WESTERVILLE State OH Zip Code 43081-2343  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JONES LANG LASALLE Occupation MAINTENANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04114**  
 Amount of Each Receipt this Period 31.00

**B. MR. HOWARD M. MCFARLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 326 E. WALNUT STREET  
 City WESTERVILLE State OH Zip Code 43081-2343  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JONES LANG LASALLE Occupation MAINTENANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04115**  
 Amount of Each Receipt this Period 50.00

**C. MR. FRANK MCGAUGHEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 LUFBERY CIRCLE  
 City WILLIAMSON State GA Zip Code 30292-6604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BRYAN CAVE, LLP Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04116**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 331.00  
**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 1477 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEVE MCGAVOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 65137  
 City LUBBOCK State TX Zip Code 79464-5137  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation AUTO DEALER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04117**  
 Amount of Each Receipt this Period 300.00

**B. MR. JOSEPH RONALD MCGGUINN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7180 S.W. WILLOWMERE DRIVE  
 City PORTLAND State OR Zip Code 97225-1137  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04118**  
 Amount of Each Receipt this Period 1.00

**C. MR. DANIEL W. MCGILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11923 KIMBERLEY LANE  
 City HOUSTON State TX Zip Code 77024-4304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer F.M.C. TECHNOLOGIES Occupation TAX MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04119**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 801.00  
**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 1478 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. AUDREY H. MCGLAUGHLIN</b>		Date of Receipt
Mailing Address 1290 BOYCE ROAD APARTMENT C127		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
PITTSBURGH	PA	15241-3919
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI04120</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
HOMEMAKER	HOMEMAKER	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MRS. PATRICIA MCGLONE</b>		Date of Receipt
Mailing Address 1445 S. CORSICA PLACE		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
TUCSON	AZ	85748-7615
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI04121</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="240.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. DAVID E. MCGONEGLE</b>		Date of Receipt
Mailing Address 4709 ALADDIN LANE		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
LAS VEGAS	NV	89102-0601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI04122</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="35.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="271.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="375.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 1479 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID E. MCGONEGLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4709 ALADDIN LANE  
 City LAS VEGAS State NV Zip Code 89102-0601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04123**  
 Amount of Each Receipt this Period  
 36.00

**B. MR. JOSEPH P. MCGOVERN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7575 EADS AVENUE UNIT 307  
 City LA JOLLA State CA Zip Code 92037-4861  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04124**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. MATTHEW B. MCGOWAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 ALLENSBY LANE  
 City SAN RAFAEL State CA Zip Code 94901-2412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CONSTRUCTION ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04125**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	236.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1480 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. THOMAS J. MCGRATH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1493 IRON BRIDGE ROAD  
 City COLUMBIA State PA Zip Code 17512-9620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation VETERINARIAN  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **330.00**

Date of Receipt **03 / 07 / 2014**  
**Transaction ID : 2014M04L11AI04126**  
 Amount of Each Receipt this Period **330.00**

**B. MR. GREGORY MCHUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11107 GREEN BAYBERRY DRIVE  
 City PALM BEACH GARDENS State FL Zip Code 33418-1511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DELOITTE CONSULTANT, L.L.P. Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI04127**  
 Amount of Each Receipt this Period **500.00**

**C. MR. KENNETH MCINTOSH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 131 OVERLOOK POINT DRIVE  
 City RIDGELAND State MS Zip Code 39157-8614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BENEFIT MGT SYSTEMS Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **201.00**

Date of Receipt **03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI04128**  
 Amount of Each Receipt this Period **201.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1031.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1481 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WALTER MCINTYRE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9710 E. 470 ROAD  
 City CLAREMORE State OK Zip Code 74017-4170  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04129**  
 Amount of Each Receipt this Period 500.00

**B. MR. ANDREW MCKEAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 620 VINE AVENUE N.E.  
 City WARREN State OH Zip Code 44483-4921  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04130**  
 Amount of Each Receipt this Period 51.00

**C. MR. MICHAEL J. MCKEON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7824 W. BOULEVARD DRIVE  
 City ALEXANDRIA State VA Zip Code 22308-1001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GISH, RICHARDSON P.C. Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04131**  
 Amount of Each Receipt this Period 2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3051.00  
**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 1482 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. EVELYN MCKINLEY-ANDRESEN</b>		Date of Receipt
Mailing Address 2750 SIERRA SUNRISE TERRACE APARTMENT 402		M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2014
City CHICO	State CA	Zip Code 95928-3998
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI04132</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>B. MS. EVELYN MCKINLEY-ANDRESEN</b>		Date of Receipt
Mailing Address 2750 SIERRA SUNRISE TERRACE APARTMENT 402		M M M / D D D / Y Y Y Y Y Y 03 / 12 / 2014
City CHICO	State CA	Zip Code 95928-3998
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI04133</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C. MS. EVELYN MCKINLEY-ANDRESEN</b>		Date of Receipt
Mailing Address 2750 SIERRA SUNRISE TERRACE APARTMENT 402		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014
City CHICO	State CA	Zip Code 95928-3998
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI04134</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		101.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1483 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN MCKINNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2430 E. BETHEL DRIVE  
 City ANAHEIM State CA Zip Code 92806-4705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04135**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. JAMES K. MCKINNON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10136 MCCARTHY ROAD  
 City ALANSON State MI Zip Code 49706-9387  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04136**  
 Amount of Each Receipt this Period  
 220.00

**C. MR. JOHN Q. MCKINNON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 229 E. LAKE SHORE DRIVE  
 City CHICAGO State IL Zip Code 60611-1351  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WINTRUST FINANCIAL CORPORATION Occupation COMMERCIAL BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04137**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	540.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1484 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GUY E. MCLAUGHLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 520  
 City State Zip Code  
 DALLAS CENTER IA 50063-0520  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 435.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04138**  
 Amount of Each Receipt this Period  
 140.00

**B. MS HELEN B. MCLAUGHLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 LINDEN AVENUE  
 City State Zip Code  
 WEST LONG BRANCH NJ 07764-1531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04139**  
 Amount of Each Receipt this Period  
 120.00

**C. MS HELEN B. MCLAUGHLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 LINDEN AVENUE  
 City State Zip Code  
 WEST LONG BRANCH NJ 07764-1531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04140**  
 Amount of Each Receipt this Period  
 165.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 425.00  
**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 1485 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. WILLIAM G. MCLAUGHLIN II</b>		Date of Receipt										
Mailing Address 1510 E. PALM AVENUE APARTMENT A405		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>04</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	03		04		2014
M M M	/	D D D	/	Y Y Y Y Y								
03		04		2014								
City TAMPA State FL Zip Code 33605-3754		<b>Transaction ID : 2014M04L11AI04141</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer RETIRED Occupation RETIRED		120.00										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼										
		431.00										

Full Name (Last, First, Middle Initial) <b>B. MR. WILLIAM G. MCLAUGHLIN II</b>		Date of Receipt										
Mailing Address 1510 E. PALM AVENUE APARTMENT A405		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>18</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	03		18		2014
M M M	/	D D D	/	Y Y Y Y Y								
03		18		2014								
City TAMPA State FL Zip Code 33605-3754		<b>Transaction ID : 2014M04L11AI04142</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer RETIRED Occupation RETIRED		30.00										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼										
		431.00										

Full Name (Last, First, Middle Initial) <b>C. MR. WILLIAM G. MCLAUGHLIN II</b>		Date of Receipt										
Mailing Address 1510 E. PALM AVENUE APARTMENT A405		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>18</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	03		18		2014
M M M	/	D D D	/	Y Y Y Y Y								
03		18		2014								
City TAMPA State FL Zip Code 33605-3754		<b>Transaction ID : 2014M04L11AI04143</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer RETIRED Occupation RETIRED		50.00										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼										
		431.00										

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1486 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. WILLIAM G. MCLAUGHLIN II</b>		Date of Receipt 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI04144</b>
Mailing Address 1510 E. PALM AVENUE APARTMENT A405		Amount of Each Receipt this Period 35.00
City TAMPA	State FL Zip Code 33605-3754	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 431.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. WILLIAM G. MCLAUGHLIN II</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI04145</b>
Mailing Address 1510 E. PALM AVENUE APARTMENT A405		Amount of Each Receipt this Period 31.00
City TAMPA	State FL Zip Code 33605-3754	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 431.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. WILLIAM G. MCLAUGHLIN II</b>		Date of Receipt 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI04146</b>
Mailing Address 1510 E. PALM AVENUE APARTMENT A405		Amount of Each Receipt this Period 40.00
City TAMPA	State FL Zip Code 33605-3754	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 431.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	106.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1487 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEPHEN M. MCLEAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 705 HIGH MOUNTAIN ROAD  
 City State Zip Code  
 FRANKLIN LAKES NJ 07417-2915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ARSENAL CAPITAL PARTNERS HEALTHCARE INVESTOR  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04147**  
 Amount of Each Receipt this Period  
 2500.00

**B. DR. RODERICK C. MCLENNAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 WESLEY DRIVE  
 APARTMENT 455  
 City State Zip Code  
 ASHEVILLE NC 28803-7305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 601.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04148**  
 Amount of Each Receipt this Period  
 361.00

**C. MRS. JILL M. MCLLOUD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4478 S. FARM ROAD 189  
 City State Zip Code  
 ROGERSVILLE MO 65742-7237  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED DISABLED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04149**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3361.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1488 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JILL M. MCLLOUD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4478 S. FARM ROAD 189  
 City State Zip Code  
 ROGERSVILLE MO 65742-7237  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED DISABLED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04150**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. KELLY D. MCMILLAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1638 W. KNUDSEN DRIVE  
 SUITE 101  
 City State Zip Code  
 PHOENIX AZ 85027-1328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MCMILLAN GROUP INTERNATION BUSINESS OWNER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04151**  
 Amount of Each Receipt this Period  
 1500.00

**C. MRS. JANE MCNEIL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 HEMLOCK ROAD  
 City State Zip Code  
 ASHEVILLE NC 28803-3046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04152**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1489 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE MCNEILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 968 MARLIN DRIVE  
 968 MARLIN DRIVE  
 City JUPITER State FL Zip Code 33458-4366  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04153**  
 Amount of Each Receipt this Period  
 75.00

**B. MRS. WINIFRED A. MCPHAIL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13509 MERCIER STREET  
 City SOUTHGATE State MI Zip Code 48195-1225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04154**  
 Amount of Each Receipt this Period  
 25.00

**C. MRS. WINIFRED A. MCPHAIL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13509 MERCIER STREET  
 City SOUTHGATE State MI Zip Code 48195-1225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04155**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 101.00  
**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 1490 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SHERRY MCPHERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 19055 INCLINE ROAD

City NORWALK State WI Zip Code 54648-7008

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SINGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04156**

Amount of Each Receipt this Period  
 110.00

**B. MR. SCOTT MCVEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 19 2ND STREET

City POLAND State OH Zip Code 44514-1614

FEC ID number of contributing federal political committee. **C**

Name of Employer ALSTEEL FAB Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04157**

Amount of Each Receipt this Period  
 101.00

**C. MR. JULIEN L. MCCALL**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 832  
MOUNTAIN LAKE

City LAKE WALES State FL Zip Code 33859-0832

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 621.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04158**

Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 212.00

**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 1491 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. LARRY MCCARDLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 910 S. HENRY ST  
 City WILLIAMSBURG State VA Zip Code 23185-3989  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04159**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. DAVID MCCARTHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 SOMMERSET CIRCLE  
 City GREENWOOD VILLAGE State CO Zip Code 80111-1403  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04160**  
 Amount of Each Receipt this Period  
 32400.00

**C. MRS. MARILYNN C. MCCARTHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 379  
 City GASQUET State CA Zip Code 95543-0379  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04161**  
 Amount of Each Receipt this Period  
 210.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32710.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1492 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM J. MCCARTHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 330 MONTGOMERY STREET  
 APARTMENT 105  
 City SYRACUSE State NY Zip Code 13202-2048  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04162**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. C. JACK MCCARTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8800 RUNFIELD ROAD  
 City NORTH RICHLAND HILLS State TX Zip Code 76182-6131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNITED HEALTHCARE Occupation ACCOUNTANT/MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04163**  
 Amount of Each Receipt this Period  
 205.00

**C. MR. GEORGE A. MCCONAGHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 962 MERRIMAC CIRCLE  
 962 MERRIMAC CIRCLE  
 City NAPERVILLE State IL Zip Code 60540-7107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation CHEMICAL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04164**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1493 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LEE J. MCCONAGHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2717 SEVILLE BLVD.  
 APARTMENT 12205  
 City CLEARWATER State FL Zip Code 33764-1188  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DE VRY UNIVERSITY Occupation TRAINING DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04165**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. LELAND H. MCCORKLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2470 COUNTY ROAD W.W.  
 City GLENN State CA Zip Code 95943-9662  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04166**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. ROBERT C. MCCORMACK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 228 SOUTH BEACH ROAD  
 City HOBE SOUND State FL Zip Code 33455-2508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04167**  
 Amount of Each Receipt this Period  
 32400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1494 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD E. MCCORMICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 519 BROOKSHIRE LN.  
 City RICHARDSON State TX Zip Code 75080-2545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04168**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. BETTY Y. MCCULLOCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8315 KINGFISHER LANE  
 City PICKERINGTON State OH Zip Code 43147-8062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 751.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04169**  
 Amount of Each Receipt this Period  
 200.00

**C. MRS. BETTY Y. MCCULLOCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8315 KINGFISHER LANE  
 City PICKERINGTON State OH Zip Code 43147-8062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 751.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04170**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 801.00  
**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 1495 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. NANCY MCDADE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4 RIVARD CRES.  
City WESTPORT State CT Zip Code 06880-4724  
FEC ID number of contributing federal political committee. **C**  
Name of Employer VOLUNTEER Occupation VOLUNTEER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 28 / 2014  
Transaction ID : 2014M04L11AI04171  
Amount of Each Receipt this Period 1000.00

**B. MR. PATRICK MCDONNELL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 25 BAY 22ND STREET  
City BROOKLYN State NY Zip Code 11214-3852  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 10 / 2014  
Transaction ID : 2014M04L11AI04172  
Amount of Each Receipt this Period 50.00

**C. MR. PATRICK MCDONNELL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 25 BAY 22ND STREET  
City BROOKLYN State NY Zip Code 11214-3852  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 11 / 2014  
Transaction ID : 2014M04L11AI04173  
Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1075.00  
**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 1496 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WAYNE MCGEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 THUNDERBIRD TRCE SE  
 City MARIETTA State GA Zip Code 30067-4756  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04174**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. FRANCIS PATRICK MCGINTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6731 S. LEYDEN COURT  
 City CENTENNIAL State CO Zip Code 80112-1005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SAFETY MANAGEMENT SYSTEMS, LLC Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04175**  
 Amount of Each Receipt this Period  
 110.00

**C. MR. FRANCIS PATRICK MCGINTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6731 S. LEYDEN COURT  
 City CENTENNIAL State CO Zip Code 80112-1005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SAFETY MANAGEMENT SYSTEMS, LLC Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04176**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	410.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1497 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARILYN MCINTIRE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3525 N. 167TH CIRCLE #326  
 City OMAHA State NE Zip Code 68116-2382  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04177**  
 Amount of Each Receipt this Period  
 120.00

**B. MS. MARILYN MCINTIRE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3525 N. 167TH CIRCLE #326  
 City OMAHA State NE Zip Code 68116-2382  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04178**  
 Amount of Each Receipt this Period  
 50.00

**C. LEONARD MCINTOSH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9400 MCINTOSH DRIVE  
 City MONTEREY State CA Zip Code 93940-6546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04179**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 670.00  
**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 1498 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BOB MCKENNA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2123 SOUTH RD  
 City CINCINNATI State OH Zip Code 45233-4264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04180**  
 Amount of Each Receipt this Period  
 330.00

**B. MR. BRUCE A. MCLEOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 4280  
 City WEST RICHLAND State WA Zip Code 99353-4004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1466.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04181**  
 Amount of Each Receipt this Period  
 133.00

**C. MR. BRUCE A. MCLEOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 4280  
 City WEST RICHLAND State WA Zip Code 99353-4004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1466.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04182**  
 Amount of Each Receipt this Period  
 1333.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1796.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1499 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN MCMASTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9288 RANCH ROAD 33  
 City GARDEN CITY State TX Zip Code 79739-2500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04183**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. CHARLES S. MCNEIL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4956 S FILLMORE CT  
 City ENGLEWOOD State CO Zip Code 80113-7146  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NEX GEN RESOURCES CORPORATION Occupation C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04184**  
 Amount of Each Receipt this Period  
 25000.00

**C. MR. DONALD J. MCPEAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 135 PINE RUN DRIVE  
 City SOUTHAMPTON State PA Zip Code 18966-2277  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04185**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 25300.00  
**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 1500 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD J. MCPEAK**  
Full Name (Last, First, Middle Initial)

Mailing Address 135 PINE RUN DRIVE

City SOUTHAMPTON State PA Zip Code 18966-2277

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04186**

Amount of Each Receipt this Period  
 51.00

**B. JUDGE WAYNE MCWHORTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 906 BERGSTROM PLACE

City MARSHALL State TX Zip Code 75672-7608

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04187**

Amount of Each Receipt this Period  
 150.00

**C. MR. MARINO MEACCI**  
Full Name (Last, First, Middle Initial)

Mailing Address 6627 W. SHIELDS AVENUE

City FRESNO State CA Zip Code 93723-9216

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 282.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04188**

Amount of Each Receipt this Period  
 40.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	241.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1501 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARINO MEACCI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6627 W. SHIELDS AVENUE  
 City FRESNO State CA Zip Code 93723-9216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 282.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04189**  
 Amount of Each Receipt this Period  
 40.00

**B. MR. MARINO MEACCI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6627 W. SHIELDS AVENUE  
 City FRESNO State CA Zip Code 93723-9216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 282.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04190**  
 Amount of Each Receipt this Period  
 42.00

**C. DR. STEPHEN R. MEACHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 615 VIEW POINT DRIVE  
 City GRAND JUNCTION State CO Zip Code 81506-8222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation M. D.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04191**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 332.00  
**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 1502 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ROBERT C. MEADE**

Mailing Address 36 ARRANDALE AVENUE

City State Zip Code  
GREAT NECK NY 11024-1804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N.Y. STATE ADMINISTRATOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04192**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. CARTER MEBANE**

Mailing Address 305 COLONIAL DRIVE

City State Zip Code  
WILMINGTON NC 28403-1207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04193**

Amount of Each Receipt this Period  
51.00

Full Name (Last, First, Middle Initial)  
**C. MR. EDWARD L. MECUM**

Mailing Address 1590 W. LANE ROAD

City State Zip Code  
MACHESNEY PARK IL 61115-1903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SPEEDWAY AUTO MALL SALES

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04194**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 801.00

**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 1503 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES MEEK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13530 SWEET HOLLOW ROAD  
 City MILLFIELD State OH Zip Code 45761-9752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04195**  
 Amount of Each Receipt this Period  
 150.00

**B. MR. JAMES MEEK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13530 SWEET HOLLOW ROAD  
 City MILLFIELD State OH Zip Code 45761-9752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04196**  
 Amount of Each Receipt this Period  
 151.00

**C. MR. JEFFREY F. MEEKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1160  
 City LOCUST GROVE State GA Zip Code 30248-1160  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MEEKS HEATING AND AIR Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04197**  
 Amount of Each Receipt this Period  
 215.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	516.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1504 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PAUL CARL MEHUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6961 FAIRPLAY ROAD  
 City SOMERSET State CA Zip Code 95684-9534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04198**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. PAUL CARL MEHUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6961 FAIRPLAY ROAD  
 City SOMERSET State CA Zip Code 95684-9534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04199**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. PAUL CARL MEHUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6961 FAIRPLAY ROAD  
 City SOMERSET State CA Zip Code 95684-9534  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04200**  
 Amount of Each Receipt this Period  
 100.00

**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: PAGE 1505 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DEAN THOMAS MEIDINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15450 JACK COURT  
 City LATHROP State CA Zip Code 95330-9682  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI04201**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. DEAN THOMAS MEIDINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15450 JACK COURT  
 City LATHROP State CA Zip Code 95330-9682  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04202**  
 Amount of Each Receipt this Period  
 30.00

**C. MR. DEAN THOMAS MEIDINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15450 JACK COURT  
 City LATHROP State CA Zip Code 95330-9682  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04203**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00  
**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 1506 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DEAN THOMAS MEIDINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15450 JACK COURT  
 City LATHROP State CA Zip Code 95330-9682  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04204**  
 Amount of Each Receipt this Period  
 15.00

**B. MR. DON MEINERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1221 E SEETON RD  
 City GRAND PRAIRIE State TX Zip Code 75054-6713  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04205**  
 Amount of Each Receipt this Period  
 100.00

**C. SILVIA MEIRELES MOSCI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 970 HWY 98 E UNIT 1603  
 City DESTIN State FL Zip Code 32541-2857  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REFRAMERICA Occupation DIRECTOR  
 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  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04206**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 365.00  
**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 1507 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. ALVIN MEISEL</b>		Date of Receipt
Mailing Address 3360 LEGACY TRACE		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
CINCINNATI	OH	45237-1728
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI04207</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="270.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="945.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. ALVIN MEISEL</b>		Date of Receipt
Mailing Address 3360 LEGACY TRACE		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
CINCINNATI	OH	45237-1728
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI04208</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="135.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="945.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. ALVIN MEISEL</b>		Date of Receipt
Mailing Address 3360 LEGACY TRACE		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
CINCINNATI	OH	45237-1728
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI04209</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="205.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="945.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="610.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 1508 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN P. MEKEEL**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 877

City TEMECULA State CA Zip Code 92593-0877

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04210**

Amount of Each Receipt this Period  
 106.00

**B. MS. ISAAC MEKEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1641 3RD AVE

City NEW YORK State NY Zip Code 10128-3623

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04211**

Amount of Each Receipt this Period  
 220.00

**C. MR. WILLIAM MELFI**  
Full Name (Last, First, Middle Initial)

Mailing Address 20 FIRST PLAZA CENTER N.W.  
SUITE 308

City ALBUQUERQUE State NM Zip Code 87102-3390

FEC ID number of contributing federal political committee. **C**

Name of Employer RESERVE INVESTMENTS CORPORATION Occupation EXECUTIVE

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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04212**

Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 476.00

**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 1509 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. GRACE MELLGREN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3685 FAIRVIEW DRIVE  
 City VISTA State CA Zip Code 92084-1023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OPHTHALMOLOGIST  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **700.00**

Date of Receipt **03 / 18 / 2014**  
**Transaction ID : 2014M04L11AI04213**  
 Amount of Each Receipt this Period **100.00**

**B. MR. ALBERT MELLINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 431 HUNTERWOOD DRIVE  
 City HOUSTON State TX Zip Code 77024-6902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OWNER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000.00**

Date of Receipt **03 / 19 / 2014**  
**Transaction ID : 2014M04L11AI04214**  
 Amount of Each Receipt this Period **5000.00**

**C. MS. GALINA MELLTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12409 URBAN DALE COURT  
 P.O. BOX 441001  
 City HOUSTON State TX Zip Code 77082-5663  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WAL MART Occupation PEOPLE GREETER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **381.00**

Date of Receipt **03 / 07 / 2014**  
**Transaction ID : 2014M04L11AI04215**  
 Amount of Each Receipt this Period **25.00**

**SUBTOTAL** of Receipts This Page (optional)..... **5125.00**  
**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 1510 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. GALINA MELLTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 12409 URBAN DALE COURT  
P.O. BOX 441001

City HOUSTON State TX Zip Code 77082-5663

FEC ID number of contributing federal political committee. **C**

Name of Employer WAL MART Occupation PEOPLE GREETER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 381.00

Date of Receipt  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04216**

Amount of Each Receipt this Period  
30.00

**B. MS. GALINA MELLTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 12409 URBAN DALE COURT  
P.O. BOX 441001

City HOUSTON State TX Zip Code 77082-5663

FEC ID number of contributing federal political committee. **C**

Name of Employer WAL MART Occupation PEOPLE GREETER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 381.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04217**

Amount of Each Receipt this Period  
60.00

**C. MS. GALINA MELLTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 12409 URBAN DALE COURT  
P.O. BOX 441001

City HOUSTON State TX Zip Code 77082-5663

FEC ID number of contributing federal political committee. **C**

Name of Employer WAL MART Occupation PEOPLE GREETER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 381.00

Date of Receipt  
03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04218**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 140.00

**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 1511 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. GALINA MELLTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12409 URBAN DALE COURT  
 P.O. BOX 441001  
 City HOUSTON State TX Zip Code 77082-5663  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WAL MART Occupation PEOPLE GREETER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 381.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04219**  
 Amount of Each Receipt this Period  
 31.00

**B. MRS. GALINA D. MELLTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12409 URBAN DALE COURT  
 City HOUSTON State TX Zip Code 77082-5663  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WAL-MART Occupation GREETER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04220**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. GALINA D. MELLTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12409 URBAN DALE COURT  
 City HOUSTON State TX Zip Code 77082-5663  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WAL-MART Occupation GREETER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04221**  
 Amount of Each Receipt this Period  
 175.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 256.00  
**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 1512 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ALICE P. MELLY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 SOUND SHORE DRIVE  
 UNIT 4  
 City GREENWICH State CT Zip Code 06830-7252  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04222**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. OTIS MELTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 606 LAUREL DR  
 City GRANITEVILLE State SC Zip Code 29829-2537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04223**  
 Amount of Each Receipt this Period  
 250.00

**C. MS. BARBARA J. MELTZER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 333 MOUNTAIN VIEW DRIVE  
 SPACE 117  
 City TALENT State OR Zip Code 97540-9318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04224**  
 Amount of Each Receipt this Period  
 3.50

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	753.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1513 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL MELUM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 82574  
 City KENMORE State WA Zip Code 98028-0574  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BOENING Occupation REQUESTED  
 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  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04225**  
 Amount of Each Receipt this Period  
**150.00**

**B. DR. DAVID CANDELARIO MENA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5236 BROOKHAVEN DR  
 City SAINT JOSEPH State MO Zip Code 64507-7767  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RADIOLOGY SPECIALISTS OF SAINT JOSEPH Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **450.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04226**  
 Amount of Each Receipt this Period  
**250.00**

**C. MRS. HELEN F. MENCKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1880 BROOKWOOD AVENUE APARTMENT 521  
 City BURLINGTON State NC Zip Code 27215-3205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **226.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04227**  
 Amount of Each Receipt this Period  
**76.00**

**SUBTOTAL** of Receipts This Page (optional)..... **476.00**  
**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 1514 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PAUL W. MENDENHALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1063 WESTFIELD ROAD  
 City ALPINE State UT Zip Code 84004-1523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04228**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. ANTONIO MENDEZ-RIVERA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9819 LA VONDA STREET  
 City RIVERVIEW State FL Zip Code 33569-5571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04229**  
 Amount of Each Receipt this Period  
 176.00

**C. MR. MICHAEL L. MENDIAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3105 BROOKHOLLOW DRIVE  
 City DALLAS State TX Zip Code 75234-6434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VOUGHT AIRCRAFT Occupation MECHANICAL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04230**  
 Amount of Each Receipt this Period  
 220.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 516.00  
**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 1515 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. EDYTHE F. MENDOLIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4031 KENNETT PIKE  
 APARTMENT 21  
 City GREENVILLE State DE Zip Code 19807-2037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04231**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. EDYTHE F. MENDOLIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4031 KENNETT PIKE  
 APARTMENT 21  
 City GREENVILLE State DE Zip Code 19807-2037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04232**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. ROBERT B. MENSCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3494 FINLAND ROAD  
 City PENNSBURG State PA Zip Code 18073-2519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer A.T. & T. Occupation SALES MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04233**  
 Amount of Each Receipt this Period  
 125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 326.00  
**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 1516 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MARILIA MERCADER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 60 BENT OAK COURT  
City DANVILLE State CA Zip Code 94506-5818  
FEC ID number of contributing federal political committee. **C**  
Name of Employer IAMQM Occupation GENERIC CONCEPT DESIGNER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04234**  
Amount of Each Receipt this Period  
400.00

**B. MR. ED MERCADO JR.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 386 MELDO PARK DRIVE  
City CORPUS CHRISTI State TX Zip Code 78411-1626  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04235**  
Amount of Each Receipt this Period  
100.00

**C. MR. ED MERCADO JR.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 386 MELDO PARK DRIVE  
City CORPUS CHRISTI State TX Zip Code 78411-1626  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04236**  
Amount of Each Receipt this Period  
40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 540.00  
**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 1518 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. JAMES H. MERIWETHER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2776 MOUNTAIN VIEW DRIVE #B  
 City LA VERNE State CA Zip Code 91750-4312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04240**  
 Amount of Each Receipt this Period  
 101.00

**B. DR. RICARDO MERLOS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4021 DUNSINANE STREET  
 City OCEAN SPRINGS State MS Zip Code 39564-3444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04241**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. CHARLES K. MERRICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 311  
 City PINEY POINT State MD Zip Code 20674-0311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04242**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	626.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1519 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES K. MERRICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 311  
 City PINEY POINT State MD Zip Code 20674-0311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04243**  
 Amount of Each Receipt this Period 25.00

**B. MRS. LONA MERRILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12582 ARGYLE ROAD MERRILL RANCH  
 City HOT SPRINGS State SD Zip Code 57747-6030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04244**  
 Amount of Each Receipt this Period 306.00

**C. MRS. DORIS MERRITHEW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 101ST AVENUE SE APARTMENT 301C  
 City BELLEVUE State WA Zip Code 98004-5303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04245**  
 Amount of Each Receipt this Period 121.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 452.00  
**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 1520 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. DR. JOHN L. MERRITT**

Mailing Address 10735 CORY LAKE DRIVE

City State Zip Code  
TAMPA FL 33647-2725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REHAB MED. SOUTH, INC. PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04246**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT EUGENE MERWORTH**

Mailing Address P.O. BOX 429

City State Zip Code  
COMANCHE TX 76442-0429

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04247**

Amount of Each Receipt this Period  
106.00

Full Name (Last, First, Middle Initial)  
**C. MRS. HERTA MESSIK**

Mailing Address 14 BALLO PLACE

City State Zip Code  
EDISON NJ 08820-3837

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI04248**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1206.00

**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 1521 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. HERTA MESSIK**  
Full Name (Last, First, Middle Initial)

Mailing Address 14 BALLO PLACE

City EDISON	State NJ	Zip Code 08820-3837
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04249**

Amount of Each Receipt this Period  
150.00

**B. MRS. HERTA MESSIK**  
Full Name (Last, First, Middle Initial)

Mailing Address 14 BALLO PLACE

City EDISON	State NJ	Zip Code 08820-3837
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04250**

Amount of Each Receipt this Period  
100.00

**C. MR. BERNARD D. MESSINGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 441 FALL CREEK

City BRANCHLAND	State WV	Zip Code 25506-8706
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
291.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04251**

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	280.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1522 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BERNARD D. MESSINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 441 FALL CREEK  
 City BRANCLAND State WV Zip Code 25506-8706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04252**  
 Amount of Each Receipt this Period 30.00

**B. MR. BERNARD D. MESSINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 441 FALL CREEK  
 City BRANCLAND State WV Zip Code 25506-8706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04253**  
 Amount of Each Receipt this Period 35.00

**C. MR. BERNARD D. MESSINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 441 FALL CREEK  
 City BRANCLAND State WV Zip Code 25506-8706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04254**  
 Amount of Each Receipt this Period 31.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 96.00  
**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 1523 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARINA T. MESSINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 BARROILHET AVENUE  
 City SAN MATEO State CA Zip Code 94401-3704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04255**  
 Amount of Each Receipt this Period  
 110.00

**B. MS. MARINA T. MESSINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 BARROILHET AVENUE  
 City SAN MATEO State CA Zip Code 94401-3704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04256**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. ROGER MESSINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 70272 ROAD 387  
 City MCCOOK State NE Zip Code 69001-8545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04257**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	312.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1524 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. PROF. ROBERT MELANCTON METCALFE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 BOWIE STREET  
 #4103  
 City AUSTIN State TX Zip Code 78703-4688  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE UNIVERSITY OF TEXAS AT AUSTIN Occupation PROFESSOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04258**  
 Amount of Each Receipt this Period 750.00

**B. MR. HARRY A. METZ JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 205 FIDDLERS POINT DRIVE  
 City SAINT AUGUSTINE State FL Zip Code 32080-6134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04259**  
 Amount of Each Receipt this Period 50.00

**C. MR. HARRY A. METZ JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 205 FIDDLERS POINT DRIVE  
 City SAINT AUGUSTINE State FL Zip Code 32080-6134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04260**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**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 1525 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HARRY A. METZ JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 205 FIDDLERS POINT DRIVE  
 City SAINT AUGUSTINE State FL Zip Code 32080-6134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04261**  
 Amount of Each Receipt this Period 100.00

**B. MR. JAMES C. METZGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 370 OLD COUNTRY ROAD SUITE 200  
 City GARDEN CITY State NY Zip Code 11530-1702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE WHITMORE GROUP Occupation OWNER/C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04262**  
 Amount of Each Receipt this Period 750.00

**C. MR. JOHN METZKO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2765 N. QUINCY STREET  
 City ARLINGTON State VA Zip Code 22207-5055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04263**  
 Amount of Each Receipt this Period 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 951.00  
**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 1526 OF 2949
	<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	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. E. GERALD MEYER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1058 COLINA DRIVE

City LARAMIE State WY Zip Code 82072-5015

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 302.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04264**

Amount of Each Receipt this Period  
 50.00

**B. DR. E. GERALD MEYER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1058 COLINA DRIVE

City LARAMIE State WY Zip Code 82072-5015

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 302.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04265**

Amount of Each Receipt this Period  
 2.00

**C. MR. ROBERT L. MEYER**  
Full Name (Last, First, Middle Initial)

Mailing Address 8515 COSTA VERDE BLVD.  
UNIT 1050

City SAN DIEGO State CA Zip Code 92122-1143

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04266**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 552.00

**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 1527 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. H. AARON MEYERS JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 837 COMMONS PARK

City STATHAM State GA Zip Code 30666-2540

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04267**

Amount of Each Receipt this Period  
 1000.00

**B. MR. GARY D. MICHELSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2447 LAUREL LAKE BLVD.

City CARMEL State IN Zip Code 46032-8902

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04268**

Amount of Each Receipt this Period  
 251.00

**C. MR. WESLEY LLOYD MIDDLETON**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 9476

City WICHITA FALLS State TX Zip Code 76308-9476

FEC ID number of contributing federal political committee. **C**

Name of Employer DEPARTMENT OF THE AIR FORCE Occupation INSTRUCTIONAL SYSTEMS SPECIALIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04269**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1301.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1528 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HELMUT MIEHLISCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23662 FOX ROAD  
 City LANESBORO State MN Zip Code 55949-8278  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04270**  
 Amount of Each Receipt this Period 45.00

**B. MRS. JANE MIERKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3421 LIMERICK ROAD  
 City CLYDE State OH Zip Code 43410-1426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04271**  
 Amount of Each Receipt this Period 120.00

**C. MRS. JANE MIERKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3421 LIMERICK ROAD  
 City CLYDE State OH Zip Code 43410-1426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04272**  
 Amount of Each Receipt this Period 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 185.00  
**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 1529 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SALLY A. MILAVEC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8 TOURNEY COVE  
 City THE HILLS State TX Zip Code 78738-1119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SETON NORTHWEST HOSPITAL AND SELF Occupation NURSE  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI04273**  
 Amount of Each Receipt this Period **300.00**

**B. MR. PAUL MILES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1077 RIVER ROAD APARTMENT 201  
 City EDGEWATER State NJ Zip Code 07020-1353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2200.00**

Date of Receipt **03 / 12 / 2014**  
**Transaction ID : 2014M04L11AI04274**  
 Amount of Each Receipt this Period **1100.00**

**C. MR. RALPH F. MILES JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 395 S. OAKLAND AVENUE #305  
 City PASADENA State CA Zip Code 91101-3316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **285.00**

Date of Receipt **03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI04275**  
 Amount of Each Receipt this Period **25.00**

**SUBTOTAL** of Receipts This Page (optional)..... **1425.00**  
**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 1530 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RALPH F. MILES JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 395 S. OAKLAND AVENUE #305  
 City PASADENA State CA Zip Code 91101-3316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04276**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. RALPH F. MILES JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 395 S. OAKLAND AVENUE #305  
 City PASADENA State CA Zip Code 91101-3316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04277**  
 Amount of Each Receipt this Period  
 25.00

**C. MR. CHESTER A. MILLER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11550 SE PLANDOME DRIVE  
 City HOBE SOUND State FL Zip Code 33455-7901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INSURANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04278**  
 Amount of Each Receipt this Period  
 250.00

**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: PAGE 1531 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID J. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4224 4TH AVENUE  
 City EAST MOLINE State IL Zip Code 61244-1902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04279**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. DUANE MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 WINDING WAY  
 City WILMINGTON State DE Zip Code 19807-1749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 980.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04280**  
 Amount of Each Receipt this Period  
 220.00

**C. MR. DUANE MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 WINDING WAY  
 City WILMINGTON State DE Zip Code 19807-1749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 980.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04281**  
 Amount of Each Receipt this Period  
 220.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 690.00  
**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 1532 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ELIZABETH ASBURY MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 PARK RIDGE LANE  
 City PASS CHRISTIAN State MS Zip Code 39571-4700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 381.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04282**  
 Amount of Each Receipt this Period  
 110.00

**B. MS. ELIZABETH ASBURY MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 PARK RIDGE LANE  
 City PASS CHRISTIAN State MS Zip Code 39571-4700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 381.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04283**  
 Amount of Each Receipt this Period  
 111.00

**C. MR. FRANK H. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 FAIRWAY DRIVE  
 City VOORHEES State NJ Zip Code 08043-9541  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04284**  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 371.00  
**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 1533 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRED B. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12800 NE SALMON CREEK AVENUE  
 City VANCOUVER State WA Zip Code 98686-3023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04285**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. FRED B. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12800 NE SALMON CREEK AVENUE  
 City VANCOUVER State WA Zip Code 98686-3023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04286**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. FRED B. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12800 NE SALMON CREEK AVENUE  
 City VANCOUVER State WA Zip Code 98686-3023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04287**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 320.00  
**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 1534 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. GLORIA VANDENBERG MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1420 HUNTINGTON LANE  
 APARTMENT 2306  
 City ROCKLEDGE State FL Zip Code 32955-2613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI04288**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. HARRIET MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3719 BERKLEY HILLS AVENUE  
 City BATON ROUGE State LA Zip Code 70809-2464  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04289**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. HERSCHEL MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 117 AVERBECK COURT  
 City MADISON State AL Zip Code 35758-6297  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04290**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1535 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JACK R. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 TURNBERRY COURT N.  
 City AIKEN State SC Zip Code 29803-5647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04291**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. JACK R. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 TURNBERRY COURT N.  
 City AIKEN State SC Zip Code 29803-5647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04292**  
 Amount of Each Receipt this Period  
 30.00

**C. MR. JACK R. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 TURNBERRY COURT N.  
 City AIKEN State SC Zip Code 29803-5647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04293**  
 Amount of Each Receipt this Period  
 15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1536 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JACK R. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 TURNBERRY COURT N.  
 City AIKEN State SC Zip Code 29803-5647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04294**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. JACK R. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 TURNBERRY COURT N.  
 City AIKEN State SC Zip Code 29803-5647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04295**  
 Amount of Each Receipt this Period  
 60.00

**C. MS. JACQUELYN MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 HERBERT HAYES DRIVE  
 City LAWRENCEVILLE State GA Zip Code 30046-5907  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CENTRAL BAPTIST CHURCH Occupation CHURCH PIANIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04296**  
 Amount of Each Receipt this Period  
 60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 121.00  
**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 1537 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JACQUELYN MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 HERBERT HAYES DRIVE

City LAWRENCEVILLE	State GA	Zip Code 30046-5907
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CENTRAL BAPTIST CHURCH	Occupation CHURCH PIANIST
--	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI04297**

Amount of Each Receipt this Period  
**45.00**

**B. MS. JACQUELYN MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 HERBERT HAYES DRIVE

City LAWRENCEVILLE	State GA	Zip Code 30046-5907
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CENTRAL BAPTIST CHURCH	Occupation CHURCH PIANIST
--	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2014**  
**Transaction ID : 2014M04L11AI04298**

Amount of Each Receipt this Period  
**50.00**

**C. MR. JAMES M. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 415 E. SOUTH STREET

City ASTORIA	State IL	Zip Code 61501-9102
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI04299**

Amount of Each Receipt this Period  
**50.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>145.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1538 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES M. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 415 E. SOUTH STREET  
 City ASTORIA State IL Zip Code 61501-9102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04300**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. JOCK MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17 E. 80TH STREET APARTMENT 8  
 City NEW YORK State NY Zip Code 10075-0144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04301**  
 Amount of Each Receipt this Period  
 201.00

**C. MR. JOHN WALCOTT MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 306 AUTUMN COURT  
 City BARTLESVILLE State OK Zip Code 74006-8001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04302**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	203.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1539 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JON F. MILLER**

Mailing Address 9271 COMMONWEALTH AVENUE

City Jacksonville State FL Zip Code 32220-1248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
TRANSTAR INDUSTRIES SALES

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04303**

Amount of Each Receipt this Period  
165.00

Full Name (Last, First, Middle Initial)  
**B. MR. JON S. MILLER**

Mailing Address 632 PRAIRIE HILLS DRIVE

City Dodgeville State WI Zip Code 53533-1674

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04304**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**C. MR. JON S. MILLER**

Mailing Address 632 PRAIRIE HILLS DRIVE

City Dodgeville State WI Zip Code 53533-1674

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04305**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 215.00

**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 1540 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JON S. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 632 PRAIRIE HILLS DRIVE  
 City DODGEVILLE State WI Zip Code 53533-1674  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04306**  
 Amount of Each Receipt this Period 25.00

**B. MS. MARY MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3540 W. AVENUE J13  
 City LANCASTER State CA Zip Code 93536-6320  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04307**  
 Amount of Each Receipt this Period 300.00

**C. MR. MICHAEL MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4402 BOXWOOD ROAD  
 City BETHESDA State MD Zip Code 20816-1818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04308**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 825.00  
**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 1541 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. MILFORD M. MILLER</b>		Date of Receipt										
Mailing Address 724 S. BEACH STREET		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>10</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	10	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	10	/	2014								
City State Zip Code PENTWATER MI 49449-9545		<b>Transaction ID : 2014M04L11AI04309</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer Occupation SELF-EMPLOYED REQUESTED		<b>50.00</b>										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<b>450.00</b>											

Full Name (Last, First, Middle Initial) <b>B. MR. MILFORD M. MILLER</b>		Date of Receipt										
Mailing Address 724 S. BEACH STREET		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>13</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	13	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	13	/	2014								
City State Zip Code PENTWATER MI 49449-9545		<b>Transaction ID : 2014M04L11AI04310</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer Occupation SELF-EMPLOYED REQUESTED		<b>100.00</b>										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<b>450.00</b>											

Full Name (Last, First, Middle Initial) <b>C. DR. PRESTON ROY MILLER</b>		Date of Receipt										
Mailing Address 2580 HYDE MANOR DRIVE N.W.		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>24</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	24	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	24	/	2014								
City State Zip Code ATLANTA GA 30327-1132		<b>Transaction ID : 2014M04L11AI04311</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer Occupation RETIRED RETIRED		<b>200.00</b>										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<b>300.00</b>											

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>350.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1542 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. PRISCILLA C. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 225 VIA TORTUGA  
 City PALM BEACH State FL Zip Code 33480-3638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation VOLUNTEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04312**  
 Amount of Each Receipt this Period  
 15000.00

**B. MRS. SARA G. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 58 WILLOW AVENUE  
 City BROOKVILLE State PA Zip Code 15825-2348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MILLER WELDING & MACHINE COMPANY Occupation OFFICE MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04313**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. SARA G. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 58 WILLOW AVENUE  
 City BROOKVILLE State PA Zip Code 15825-2348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MILLER WELDING & MACHINE COMPANY Occupation OFFICE MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04314**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15750.00  
**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 1543 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SARA G. MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 58 WILLOW AVENUE  
 City BROOKVILLE State PA Zip Code 15825-2348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MILLER WELDING & MACHINE COMPANY Occupation OFFICE MANAGER  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04315**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. WILLIAM CAREY MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1970 SW QUINNEY PLACE  
 City PENDLETON State OR Zip Code 97801-4347  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04316**  
 Amount of Each Receipt this Period  
 110.00

**C. MS. DORIS MILLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 60 BALSAM DRIVE APARTMENT 115  
 City HALLOWELL State ME Zip Code 04347-3008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04317**  
 Amount of Each Receipt this Period  
 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	215.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1544 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. DORIS MILLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 60 BALSAM DRIVE  
 APARTMENT 115  
 City HALLOWELL State ME Zip Code 04347-3008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04318**  
 Amount of Each Receipt this Period  
 55.00

**B. MR. GEOFFREY MILLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8119 HEATHERTON LANE  
 APARTMENT 203  
 City VIENNA State VA Zip Code 22180-7406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BOBBY VAN'S GRILL Occupation DINING ROOM CAPTAIN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04319**  
 Amount of Each Receipt this Period  
 31.00

**C. MR. JERRY W. MILLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5316 MONTROSE DRIVE  
 City DALLAS State TX Zip Code 75209-5616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BAHER BOTTS LLP Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI04320**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	336.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1545 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN MILLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 614 SHADOW MIST COURT  
 City LIVERMORE State CA Zip Code 94550-8650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WHCI PLUMBING SUPPLY COMPANY Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 8000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04321**  
 Amount of Each Receipt this Period  
 5000.00

**B. MR. JOHN MILLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 614 SHADOW MIST COURT  
 City LIVERMORE State CA Zip Code 94550-8650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WHCI PLUMBING SUPPLY COMPANY Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 8000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04322**  
 Amount of Each Receipt this Period  
 3000.00

**C. DR. JOHN G. MILLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13226 N. FM 1189  
 City LIPAN State TX Zip Code 76462-7700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE OF TEXAS Occupation PHYSICIAN  
 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  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04323**  
 Amount of Each Receipt this Period  
 130.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8130.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1546 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES C. MILNE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1312 S.W. 16TH AVENUE  
 SUITE 101  
 City PORTLAND State OR Zip Code 97201-2620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PROPERTY MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 486.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04324**  
 Amount of Each Receipt this Period  
 1.00

**B. MRS. JACQUELINE A. MILNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1560 N. SANDBURG TERRACE  
 APARTMENT 2302  
 City CHICAGO State IL Zip Code 60610-7720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04325**  
 Amount of Each Receipt this Period  
 201.00

**C. MS. SANDI MIMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 533 INNER CIRCLE  
 City THE VILLAGES State FL Zip Code 32162-1125  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04326**  
 Amount of Each Receipt this Period  
 75.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	277.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1547 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE WESLEY MINARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 7  
 City EVERGREEN State CO Zip Code 80437-0007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04327**  
 Amount of Each Receipt this Period  
 70.00

**B. MR. GEORGE WESLEY MINARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 7  
 City EVERGREEN State CO Zip Code 80437-0007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04328**  
 Amount of Each Receipt this Period  
 70.00

**C. MR. WILLIAM MINCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4524 ROSEWOOD COURT  
 City MIDDLETOWN State OH Zip Code 45042-3862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04329**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 390.00  
**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 1548 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LUCIYA MINER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4393 SUNSHINE LAKE ROAD

City DULUTH State MN Zip Code 55803-8308

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 24 / 2014  
Transaction ID : 2014M04L11AI04330

Amount of Each Receipt this Period 400.00

**B. MR. ALONZO GALVEZ MINJARES**  
Full Name (Last, First, Middle Initial)

Mailing Address 13500 N. RANCHO VISTOSO BLVD.  
APARTMENT 303

City ORO VALLEY State AZ Zip Code 85755-5961

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 13 / 2014  
Transaction ID : 2014M04L11AI04331

Amount of Each Receipt this Period 500.00

**C. MR. ALONZO GALVEZ MINJARES**  
Full Name (Last, First, Middle Initial)

Mailing Address 13500 N. RANCHO VISTOSO BLVD.  
APARTMENT 303

City ORO VALLEY State AZ Zip Code 85755-5961

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 24 / 2014  
Transaction ID : 2014M04L11AI04332

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1400.00

**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 1549 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. RACHEL MINKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17024 BARIUM STREET NW  
 City ANDOVER State MN Zip Code 55304-1623  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04333**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. ANTHONY D. MINNICK JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5920 ROBIN COURT  
 City LINCOLN State NE Zip Code 68516-2364  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04334**  
 Amount of Each Receipt this Period  
 111.00

**C. DR. CORNEL MIRCEA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16 HIGHPOINT  
 City CEDAR GROVE State NJ Zip Code 07009-1975  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04335**  
 Amount of Each Receipt this Period  
 240.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 451.00  
**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 1550 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. ANTHONY N. MISHIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 PELHAM DRIVE  
 City WEST DEPTFORD State NJ Zip Code 08051-1737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04336**  
 Amount of Each Receipt this Period 500.00

**B. MR. STEPHEN J. MISKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 724975  
 City ATLANTA State GA Zip Code 31139-1975  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation POOL CONSTRUCTION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04337**  
 Amount of Each Receipt this Period 25.00

**C. MR. STEPHEN J. MISKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 724975  
 City ATLANTA State GA Zip Code 31139-1975  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation POOL CONSTRUCTION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04338**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 575.00  
**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 1551 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEPHEN J. MISKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 724975  
 City ATLANTA State GA Zip Code 31139-1975  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation POOL CONSTRUCTION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04339**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. THOMAS A. MISKIMEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 533  
 1244 ARBOR ROAD  
 City WINSTON SALEM State NC Zip Code 27102-0533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04340**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. HAROLD MITCHELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 3374  
 City ENFIELD State CT Zip Code 06083-3374  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04341**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**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 1552 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY AINSWORTH MITCHELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3286 NORTHSIDE PARKWAY N.W.  
 APARTMENT 907  
 City ATLANTA State GA Zip Code 30327-2248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04342**  
 Amount of Each Receipt this Period 201.00

**B. MRS. REGINA M. MITCHELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3625 E. MARKET STREET  
 City WARREN State OH Zip Code 44484-4637  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WARREN FABRICATING CORPORATION Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04343**  
 Amount of Each Receipt this Period 1000.00

**C. MR. ROBERT A. MITCHELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 107 LINDGREN ROAD  
 City SPRINGFIELD State VT Zip Code 05156-9421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04344**  
 Amount of Each Receipt this Period 65.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1266.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1553 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT A. MITCHELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 107 LINDGREN ROAD  
 City SPRINGFIELD State VT Zip Code 05156-9421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04345**  
 Amount of Each Receipt this Period 50.00

**B. MR. THEODORE N. MITCHELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 419  
 City SOUTH LYON State MI Zip Code 48178-0419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF - EMPLOYED Occupation METAL TRADER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04346**  
 Amount of Each Receipt this Period 120.00

**C. MR. THOMAS E. MITCHELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16 DANNAH DRIVE  
 City CARLISLE State PA Zip Code 17015-7924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VETTEM LLC Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04347**  
 Amount of Each Receipt this Period 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	670.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1554 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. MARK A. MITROVICH</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2014 <b>Transaction ID : 2014M04L11AI04348</b>
Mailing Address 216 S. WHISPERING HILLS DRIVE		Amount of Each Receipt this Period 255.00
City NAPERVILLE	State IL	Zip Code 60540-4279
FEC ID number of contributing federal political committee. C	Name of Employer PEARSON N.A.	Occupation CHIEF ACADEMIC OFFICER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. HELEN M. MITZMAN</b>		Date of Receipt MM / DD / YYYY 03 / 11 / 2014 <b>Transaction ID : 2014M04L11AI04349</b>
Mailing Address 2057 WAWONA STREET		Amount of Each Receipt this Period 1000.00
City SAN FRANCISCO	State CA	Zip Code 94116-2949
FEC ID number of contributing federal political committee. C	Name of Employer RETIRED	Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1201.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. HELEN M. MITZMAN</b>		Date of Receipt MM / DD / YYYY 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI04350</b>
Mailing Address 2057 WAWONA STREET		Amount of Each Receipt this Period 50.00
City SAN FRANCISCO	State CA	Zip Code 94116-2949
FEC ID number of contributing federal political committee. C	Name of Employer RETIRED	Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1305.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1555 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. HELEN M. MITZMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 2057 WAWONA STREET

City SAN FRANCISCO State CA Zip Code 94116-2949

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04351**

Amount of Each Receipt this Period  
 26.00

**B. MR. A. MALACHI MIXON III**  
Full Name (Last, First, Middle Initial)

Mailing Address 3105 TOPPING LANE

City CHAGRIN FALLS State OH Zip Code 44022-6649

FEC ID number of contributing federal political committee. **C**

Name of Employer INVACARE CORPORATION Occupation CHAIRMAN & C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 32000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04352**

Amount of Each Receipt this Period  
 32000.00

**C. MR. JOHN MIZUKI**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 RIDGE CREST CIRCLE

City POMONA State CA Zip Code 91766-4914

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 316.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04353**

Amount of Each Receipt this Period  
 315.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32341.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1556 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN MIZUKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 RIDGE CREST CIRCLE  
 City POMONA State CA Zip Code 91766-4914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 316.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04354**  
 Amount of Each Receipt this Period  
 1.00

**B. DR. KEYHAN MOBASSERI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5162 BROADWAY AVENUE  
 City CLEVELAND State OH Zip Code 44127-1571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04355**  
 Amount of Each Receipt this Period  
 211.00

**C. ANTHONY MOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5665 22ND AVE SE  
 City KINTYRE State ND Zip Code 58549-9454  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04356**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	462.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1557 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MITCHELL D. MOCZULSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14418 S. MERRINEY ROAD  
 City CHENEY State WA Zip Code 99004-9036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04357**  
 Amount of Each Receipt this Period 240.00

**B. MR. JAMES MODE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W6691 KIESLING ROAD  
 City JEFFERSON State WI Zip Code 53549-9609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04358**  
 Amount of Each Receipt this Period 200.00

**C. MR. JAMES MODE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W6691 KIESLING ROAD  
 City JEFFERSON State WI Zip Code 53549-9609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04359**  
 Amount of Each Receipt this Period 65.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 505.00  
**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 1558 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RAYMOND L. MODJESKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 613 MADRID AVENUE  
 City VENICE State FL Zip Code 34285-1315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04360**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. DAVID MOELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23261 MILLVILLE WAY  
 City MILLVILLE State CA Zip Code 96062-9746  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04361**  
 Amount of Each Receipt this Period  
 231.00

**C. DR. FREDERICK L. MOFFAT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 JOHN RINGLING BLVD.  
 APARTMENT N306  
 City SARASOTA State FL Zip Code 34236-1542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04362**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 282.00  
**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 1559 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MELINDA MOGAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3918 DRAKE STREET  
 City HOUSTON State TX Zip Code 77005-1122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MOGAS INDUSTRIES Occupation C.O.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04363**  
 Amount of Each Receipt this Period  
 120.00

**B. DMITRY MOGILEVSKY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15 SHORERIDGE  
 City NEWPORT COAST State CA Zip Code 92657-1812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 465.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04364**  
 Amount of Each Receipt this Period  
 80.00

**C. MR. RICHARD MOLKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8 IVINS PL  
 City RUMSON State NJ Zip Code 07760-1020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04365**  
 Amount of Each Receipt this Period  
 265.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	465.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1560 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM MOLL**  
Full Name (Last, First, Middle Initial)

Mailing Address 7362 W PARKS HWY NO 613

City WASILLA	State AK	Zip Code 99623-9300
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ALASKA SALES AND SER	Occupation SALES MANAGER
--	-----------------------------

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
03	/	13	/	2014

**Transaction ID : 2014M04L11AI04366**

Amount of Each Receipt this Period  
750.00

**B. MRS. SUE CLAY MOLONEY**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 50

City KEY WEST	State FL	Zip Code 33041-0050
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation SMALL BUSINESS OWNER
--------------------------	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2014

**Transaction ID : 2014M04L11AI04367**

Amount of Each Receipt this Period  
500.00

**C. MR. DAVE C. MOLTA**  
Full Name (Last, First, Middle Initial)

Mailing Address 7037 CRANE COURT

City CARLSBAD	State CA	Zip Code 92011-4012
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer PACIFIC ADHESIVES	Occupation CHEMIST
---------------------------------------	-----------------------

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
03	/	24	/	2014

**Transaction ID : 2014M04L11AI04368**

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1561 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. AIMEE MOMMSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 205 N. PASTURE LANE  
 City STRATFORD State CT Zip Code 06614-1391  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04369**  
 Amount of Each Receipt this Period  
 10.00

**B. MS. AIMEE MOMMSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 205 N. PASTURE LANE  
 City STRATFORD State CT Zip Code 06614-1391  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04370**  
 Amount of Each Receipt this Period  
 20.00

**C. MS. AIMEE MOMMSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 205 N. PASTURE LANE  
 City STRATFORD State CT Zip Code 06614-1391  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04371**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40.00  
**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 1562 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. AIMEE MOMMSEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 205 N. PASTURE LANE

City STRATFORD State CT Zip Code 06614-1391

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **311.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI04372**

Amount of Each Receipt this Period  
**11.00**

**B. MR. EDWARD MONAHAN JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 121 WATERCREST DRIVE

City DOYLESTOWN State PA Zip Code 18901-3267

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SALESMAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2014**  
**Transaction ID : 2014M04L11AI04373**

Amount of Each Receipt this Period  
**50.00**

**C. MR. EDWARD MONAHAN JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 121 WATERCREST DRIVE

City DOYLESTOWN State PA Zip Code 18901-3267

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SALESMAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 19 / 2014**  
**Transaction ID : 2014M04L11AI04374**

Amount of Each Receipt this Period  
**55.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>116.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1563 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. NICHOLAS E. MONCHAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5320 205 LOOP  
 APARTMENT 250  
 City TEMPLE State TX Zip Code 76502-4895  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04375**  
 Amount of Each Receipt this Period 15.00

**B. MS. ESTHER C. MONFORT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1409 LINKWOOD LANE  
 City DECATUR State GA Zip Code 30033-3330  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04376**  
 Amount of Each Receipt this Period 50.00

**C. MS. ESTHER C. MONFORT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1409 LINKWOOD LANE  
 City DECATUR State GA Zip Code 30033-3330  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04377**  
 Amount of Each Receipt this Period 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	85.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1564 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. FATHER DUNCAN W. MONOHAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1176  
 City WINTERHAVEN State CA Zip Code 92283-1176  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DIOCESE OF SAN DIEGO Occupation CATHOLIC PRIEST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04378**  
 Amount of Each Receipt this Period 500.00

**B. MR. GORDON MONSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2861 BODDER RD  
 City RIEGELSVILLE State PA Zip Code 18077-9512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04379**  
 Amount of Each Receipt this Period 215.00

**C. MR. HARRY MONTAGUE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 220 CEDAR ROAD  
 City CHESAPEAKE State VA Zip Code 23322-5512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MAINTENANCE CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04380**  
 Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1015.00  
**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 1565 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEOFFREY R. MONTEITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20243 PALOU DRIVE  
 City SALINAS State CA Zip Code 93908-1226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04381**  
 Amount of Each Receipt this Period  
 45.00

**B. MR. RUBEN MONTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1125 COLGATE AVENUE  
 City BRONX State NY Zip Code 10472-3126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PICO ELECTRONICS Occupation TOOL & DIE MAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5002.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04382**  
 Amount of Each Receipt this Period  
 5002.00

**C. MR. JOSEPH C. MONTESANO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14914 CROSS ISLAND PARKWAY  
 City WHITESTONE State NY Zip Code 11357-2532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer D.T.M., INC. Occupation ELEVATOR CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04383**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5247.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1566 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. KENNETH R. MONTFORD</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI04384</b>
Mailing Address 74 GENESEE STREET		Amount of Each Receipt this Period 120.00
City ATTICA	State NY	Zip Code 14011-1137
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>B. MR. KENNETH R. MONTFORD</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI04385</b>
Mailing Address 74 GENESEE STREET		Amount of Each Receipt this Period 100.00
City ATTICA	State NY	Zip Code 14011-1137
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. MARJORIE JEAN MONTGOMERY</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 03 / 2014 <b>Transaction ID : 2014M04L11AI04386</b>
Mailing Address 8826 HAROLD DRIVE		Amount of Each Receipt this Period 35.00
City SAINT LOUIS	State MO	Zip Code 63134-3205
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	255.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1567 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. MARJORIE JEAN MONTGOMERY**

Mailing Address 8826 HAROLD DRIVE

City State Zip Code  
SAINT LOUIS MO 63134-3205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04387**

Amount of Each Receipt this Period  
35.00

Full Name (Last, First, Middle Initial)  
**B. MRS. MARJORIE JEAN MONTGOMERY**

Mailing Address 8826 HAROLD DRIVE

City State Zip Code  
SAINT LOUIS MO 63134-3205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04388**

Amount of Each Receipt this Period  
20.00

Full Name (Last, First, Middle Initial)  
**C. MRS. MARJORIE JEAN MONTGOMERY**

Mailing Address 8826 HAROLD DRIVE

City State Zip Code  
SAINT LOUIS MO 63134-3205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04389**

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 90.00

**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 1568 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARJORIE JEAN MONTGOMERY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8826 HAROLD DRIVE  
 City SAINT LOUIS State MO Zip Code 63134-3205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04390**  
 Amount of Each Receipt this Period 35.00

**B. MRS. MARJORIE JEAN MONTGOMERY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8826 HAROLD DRIVE  
 City SAINT LOUIS State MO Zip Code 63134-3205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04391**  
 Amount of Each Receipt this Period 40.00

**C. MRS. MARY MONTGOMERY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1621 SUN VALLEY COURT  
 City LAKEWAY State TX Zip Code 78734-5267  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04392**  
 Amount of Each Receipt this Period 201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 276.00  
**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 1569 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JERRY E. MOODY**

Mailing Address 7033 WIKLE ROAD W.

City State Zip Code  
BRENTWOOD TN 37027-6611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04393**

Amount of Each Receipt this Period  
126.00

Full Name (Last, First, Middle Initial)  
**B. MR. RICHARD L. MOOMAU**

Mailing Address 3032 STRATMOOR HILLS AVENUE

City State Zip Code  
HENDERSON NV 89052-6923

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04394**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**C. MR. RICHARD L. MOOMAU**

Mailing Address 3032 STRATMOOR HILLS AVENUE

City State Zip Code  
HENDERSON NV 89052-6923

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04395**

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 186.00

**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 1570 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD L. MOOMAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3032 STRATMOOR HILLS AVENUE  
 City Henderson State NV Zip Code 89052-6923  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04396**  
 Amount of Each Receipt this Period 25.00

**B. MR. RICHARD L. MOOMAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3032 STRATMOOR HILLS AVENUE  
 City Henderson State NV Zip Code 89052-6923  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04397**  
 Amount of Each Receipt this Period 25.00

**C. MR. RICHARD L. MOOMAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3032 STRATMOOR HILLS AVENUE  
 City Henderson State NV Zip Code 89052-6923  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04398**  
 Amount of Each Receipt this Period 46.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 96.00  
**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 1571 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JON MOON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1237  
 City ADA State OK Zip Code 74821-1237  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MOON-BAKER AGENCY, INC. Occupation INSURANCE AGENT  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 300.00

Date of Receipt  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04399**  
 Amount of Each Receipt this Period  
 300.00

**B. MS. ROBBI MOON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 215  
 City GOSHEN State OH Zip Code 45122-0215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation SALES  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 460.00

Date of Receipt  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04400**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. ROBBI MOON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 215  
 City GOSHEN State OH Zip Code 45122-0215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation SALES  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 460.00

Date of Receipt  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04401**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 520.00  
**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 1572 OF 2949
	<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	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ROBBI MOON**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 215

City GOSHEN State OH Zip Code 45122-0215

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04402**

Amount of Each Receipt this Period  
 120.00

**B. MR. ARTHUR REGINALD MOORE**  
Full Name (Last, First, Middle Initial)

Mailing Address 614 WOODWYN COURT

City NORTH PORT State FL Zip Code 34287-3332

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

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  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04403**

Amount of Each Receipt this Period  
 150.00

**C. MR. CHARLES D. MOORE**  
Full Name (Last, First, Middle Initial)

Mailing Address 505 E. 12TH AVENUE

City NAPERVILLE State IL Zip Code 60563-2809

FEC ID number of contributing federal political committee. **C**

Name of Employer KONE, INC. Occupation SENIOR VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
506.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04404**

Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 271.00

**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 1573 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES D. MOORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 505 E. 12TH AVENUE  
 City NAPERVILLE State IL Zip Code 60563-2809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KONE, INC. Occupation SENIOR VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 506.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04405**  
 Amount of Each Receipt this Period  
 505.00

**B. MR. DANIEL CHARLES MOORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2777 PARADISE RD UNIT 2202  
 City LAS VEGAS State NV Zip Code 89109-9114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation REAL ESTATE  
 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  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04406**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JACK WESLEY MOORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 64301 E. SQUASH BLOSSOM LANE  
 City TUCSON State AZ Zip Code 85739-1044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 516.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04407**  
 Amount of Each Receipt this Period  
 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 660.00  
**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 1574 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JACK WESLEY MOORE**  
Full Name (Last, First, Middle Initial)

Mailing Address 64301 E. SQUASH BLOSSOM LANE

City TUCSON	State AZ	Zip Code 85739-1044
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
516.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI04408**

Amount of Each Receipt this Period  
56.00

**B. MR. JACK WESLEY MOORE**  
Full Name (Last, First, Middle Initial)

Mailing Address 64301 E. SQUASH BLOSSOM LANE

City TUCSON	State AZ	Zip Code 85739-1044
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
516.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2014

**Transaction ID : 2014M04L11AI04409**

Amount of Each Receipt this Period  
50.00

**C. MR. KENNETH W. MOORE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1060 WILDWINN DRIVE

City ALVIN	State TX	Zip Code 77511-5027
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
451.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2014

**Transaction ID : 2014M04L11AI04410**

Amount of Each Receipt this Period  
201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	307.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1575 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. LINDA MARIAN MOORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1856 LAUREL CANYON BLVD  
 City LOS ANGELES State CA Zip Code 90046-2029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ORACLE Occupation SENIOR MANAGER, PARTNER ENABLEMEN  
 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  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04411**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. LOUISE MOORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4275 OWENS ROAD APARTMENT 3080  
 City EVANS State GA Zip Code 30809-3083  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI04412**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. LYLE DUANE MOORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 JUAREZ  
 City LAKE OSWEGO State OR Zip Code 97035-1031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04413**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1576 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SHANNON MOORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2088 NE SAWDUST HILL ROAD  
 City POULSBO State WA Zip Code 98370-9128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04414**  
 Amount of Each Receipt this Period: 1000.00

**B. MR. TERRY WARD MOORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14039 BLACKCASTLE COURT  
 City KING GEORGE State VA Zip Code 22485-5570  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **REQUESTED** Occupation: **REQUESTED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04415**  
 Amount of Each Receipt this Period: 120.00

**C. MR. THOMAS MOORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 670606  
 City DALLAS State TX Zip Code 75367-0606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RAYTHEON** Occupation: **ENGINEER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04416**  
 Amount of Each Receipt this Period: 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1577 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TIMOTHY MOORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 220 10TH STREET  
 City WEST PALM BEACH State FL Zip Code 33401-3502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04417**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. WILLIAM A. MOORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1803 6TH STREET  
 City LINCOLN State CA Zip Code 95648-2314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MANUFACTURED HOME REMODELING & S/  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04418**  
 Amount of Each Receipt this Period  
 40.00

**C. MR. WILLIAM A. MOORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1803 6TH STREET  
 City LINCOLN State CA Zip Code 95648-2314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MANUFACTURED HOME REMODELING & S/  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04419**  
 Amount of Each Receipt this Period  
 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	190.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1578 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM A. MOORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1803 6TH STREET  
 City LINCORN State CA Zip Code 95648-2314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MANUFACTURED HOME REMODELING & S/  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04420**  
 Amount of Each Receipt this Period  
 81.00

**B. MR. CHARLES MOORWOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1041 LANARK CT  
 City SUNNYVALE State CA Zip Code 94087-5047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFINERA CORP Occupation ENGINEER  
 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  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04421**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. JUAN MORA JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10847 CHARTWELL COURT  
 City LAS VEGAS State NV Zip Code 89135-2216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04422**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 501.00  
**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 1579 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JUAN MORA JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10847 CHARTWELL COURT  
 City LAS VEGAS State NV Zip Code 89135-2216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04423**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. YVONNE T. MORA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 444 E. 249TH STREET  
 City CARSON State CA Zip Code 90745-6537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04424**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. ALEX MORALES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1200 W. CONNECTICUT AVENUE  
 City ANAHEIM State CA Zip Code 92801-5909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI04425**  
 Amount of Each Receipt this Period  
 220.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 620.00  
**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 1580 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. WILLIAM J. MORAN**

Mailing Address 5349 ALGARROBO  
UNIT B.

City LAGUNA WOODS      State CA      Zip Code 92637-2568

FEC ID number of contributing federal political committee. **C**

Name of Employer FINDERS USA INC      Occupation SALES

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04426**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT L. MORASKI**

Mailing Address 1565 LONG CREEK ROAD

City GREENEVILLE      State TN      Zip Code 37743-8259

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
351.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04427**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**C. MR. ROBERT L. MORASKI**

Mailing Address 1565 LONG CREEK ROAD

City GREENEVILLE      State TN      Zip Code 37743-8259

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
351.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04428**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 221.00

**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 1581 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WOOD LEE MORCOM JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 317 SHADY OAK DRIVE  
 City MADISON HEIGHTS State VA Zip Code 24572-5978  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04429**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. WOOD LEE MORCOM JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 317 SHADY OAK DRIVE  
 City MADISON HEIGHTS State VA Zip Code 24572-5978  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04430**  
 Amount of Each Receipt this Period  
 30.00

**C. MARCELLE M. MORCOS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 ALBERTSON LANE  
 City OLD WESTBURY State NY Zip Code 11568-1412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer M.D. Occupation M.D.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04431**  
 Amount of Each Receipt this Period  
 275.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 425.00  
**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 1582 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GERALD M. MOREL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16 SUNRISE LANE  
 City State Zip Code  
 GILLETTE WY 82716-4920  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED RANCHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 403.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04432**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. GERALD M. MOREL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16 SUNRISE LANE  
 City State Zip Code  
 GILLETTE WY 82716-4920  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED RANCHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 403.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04433**  
 Amount of Each Receipt this Period  
 103.00

**C. MR. BERNARDO MORENO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29889 CHAIRMANS ROWE  
 City State Zip Code  
 WESTLAKE OH 44145-6711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED REAL ESTATE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04434**  
 Amount of Each Receipt this Period  
 32400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 32603.00  
**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 1583 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. GERALDENE MOREY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 221856

City NEWHALL	State CA	Zip Code 91322-1856
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04435**

Amount of Each Receipt this Period  
 1.00

**B. MR. JOHN B. MOREY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1294

City EDMOND	State OK	Zip Code 73083-1294
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation OIL & GAS LANDMAN
-----------------------------------	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04436**

Amount of Each Receipt this Period  
 100.00

**C. MR. ARTHUR W. MORGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4348 OLIN STREET

City NEW PORT RICHEY	State FL	Zip Code 34653-7210
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04437**

Amount of Each Receipt this Period  
 35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	136.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1584 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ARTHUR W. MORGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4348 OLIN STREET  
 City NEW PORT RICHEY State FL Zip Code 34653-7210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04438**  
 Amount of Each Receipt this Period  
 30.00

**B. MR. ARTHUR W. MORGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4348 OLIN STREET  
 City NEW PORT RICHEY State FL Zip Code 34653-7210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04439**  
 Amount of Each Receipt this Period  
 36.00

**C. MR. ARTHUR W. MORGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4348 OLIN STREET  
 City NEW PORT RICHEY State FL Zip Code 34653-7210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04440**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 116.00  
**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 1585 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. CLABE E. MORGAN**

Mailing Address **463 LAWELAWE STREET**

City **HONOLULU**      State **HI**      Zip Code **96821-1911**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **U.S.A.F.**      Occupation **MILITARY OFFICER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**03 / 07 / 2014**  
**Transaction ID : 2014M04L11AI04441**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**B. CLABE E. MORGAN**

Mailing Address **463 LAWELAWE STREET**

City **HONOLULU**      State **HI**      Zip Code **96821-1911**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **U.S.A.F.**      Occupation **MILITARY OFFICER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**03 / 20 / 2014**  
**Transaction ID : 2014M04L11AI04442**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**C. DR WILLIAM C MORGAN**

Mailing Address **234 BAKER LANE**

City **CHARLESTON**      State **WV**      Zip Code **25302-2936**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI04443**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **550.00**

**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 1586 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EARL T. MORGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 800 BEIRNE AVENUE N.E.  
 City HUNTSVILLE State AL Zip Code 35801-6201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04444**  
 Amount of Each Receipt this Period  
 200.00

**B. MRS. GEORGIA MORGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 2747  
 City HARLINGEN State TX Zip Code 78551-2747  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04445**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. ROLAND R. MORGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 210 NEMOURS COVE  
 City MAUMELLE State AR Zip Code 72113-6755  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04446**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1587 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CONNIE M. MORGANTI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 OLD BRANCHVILLE ROAD  
 P.O. BOX 1089  
 City RIDGEFIELD State CT Zip Code 06877-6018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **03 / 18 / 2014**  
**Transaction ID : 2014M04L11AI04447**  
 Amount of Each Receipt this Period: **300.00**

**B. MS. CONNIE M. MORGANTI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 OLD BRANCHVILLE ROAD  
 P.O. BOX 1089  
 City RIDGEFIELD State CT Zip Code 06877-6018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **301.00**

Date of Receipt: **03 / 27 / 2014**  
**Transaction ID : 2014M04L11AI04448**  
 Amount of Each Receipt this Period: **1.00**

**C. MR. DONALD E. MORIARTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address R.R 3 BOX H-4  
 City PROVO CANYON State UT Zip Code 84604-8908  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **ORGANICS MOTORS, LLC** Occupation: **C.E.O.**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt: **03 / 18 / 2014**  
**Transaction ID : 2014M04L11AI04449**  
 Amount of Each Receipt this Period: **1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1301.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1588 OF 2949
	(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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY ELLA MORIE**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 255

City MAURICETOWN State NJ Zip Code 08329-0255

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 14 / 2014**

**Transaction ID : 2014M04L11AI04450**

Amount of Each Receipt this Period  
**50.00**

**B. MR. JOHN R. MORITZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 53 LOXLEY LANE

City CROSSVILLE State TN Zip Code 38558-5808

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 27 / 2014**

**Transaction ID : 2014M04L11AI04451**

Amount of Each Receipt this Period  
**200.00**

**C. MR. ROBERT C. MORRILL**  
Full Name (Last, First, Middle Initial)

Mailing Address 116 CHESTNUT STREET

City FAIRHAVEN State MA Zip Code 02719-3924

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **276.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2014**

**Transaction ID : 2014M04L11AI04452**

Amount of Each Receipt this Period  
**90.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>340.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1589 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. ROBERT C. MORRILL</b>		Date of Receipt
Mailing Address 116 CHESTNUT STREET		M M M / D D D / Y Y Y Y Y Y 03 / 19 / 2014
City	State	Zip Code
FAIRHAVEN	MA	02719-3924
FEC ID number of contributing federal political committee.	C	<b>Transaction ID : 2014M04L11AI04453</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	40.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	276.00	

Full Name (Last, First, Middle Initial) <b>B. MR. ROBERT C. MORRILL</b>		Date of Receipt
Mailing Address 116 CHESTNUT STREET		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City	State	Zip Code
FAIRHAVEN	MA	02719-3924
FEC ID number of contributing federal political committee.	C	<b>Transaction ID : 2014M04L11AI04454</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	1.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	276.00	

Full Name (Last, First, Middle Initial) <b>C. MR. ROBERT C. MORRILL</b>		Date of Receipt
Mailing Address 116 CHESTNUT STREET		M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2014
City	State	Zip Code
FAIRHAVEN	MA	02719-3924
FEC ID number of contributing federal political committee.	C	<b>Transaction ID : 2014M04L11AI04455</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	35.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	276.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	76.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1590 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID B. MORRIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 5-15 HAZEL PLACE

City State Zip Code  
FAIR LAWN NJ 07410-1643

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04456**

Amount of Each Receipt this Period  
220.00

**B. MR. H. DENVER MORRIS JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 16012 RANCH HOUSE ROAD

City State Zip Code  
CHINO HILLS CA 91709-2376

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
DENVER, BRYAN & MORRIS, LLC INSURANCE BROKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1190.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04457**

Amount of Each Receipt this Period  
750.00

**C. MR. JOSEPH W. MORRIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2300 RIVERSIDE DRIVE  
UNIT 10E

City State Zip Code  
TULSA OK 74114-2404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
GABLE & GOTWALS LAWYER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04458**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1070.00

**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 1591 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOSEPH W. MORRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2300 RIVERSIDE DRIVE  
 UNIT 10E  
 City TULSA State OK Zip Code 74114-2404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GABLE & GOTWALS Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04459**  
 Amount of Each Receipt this Period  
 101.00

**B. MR. MARTIN SCIENS MORRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5200 CHEROKEE COURT  
 City TROY State MI Zip Code 48098-2475  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04460**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. REECE V. MORRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7555 MAYSVILLE ROAD  
 City MAYSVILLE State GA Zip Code 30558-3529  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04461**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 501.00  
**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 1592 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. REECE V. MORRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7555 MAYSVILLE ROAD  
 City MAYSVILLE State GA Zip Code 30558-3529  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04462**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. JOHN R. MORRISON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 SOUTH AVENUE APARTMENT 206E  
 City CRANFORD State NJ Zip Code 07016-2187  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI04463**  
 Amount of Each Receipt this Period  
 105.00

**C. MR. JOHN W. MORRISS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13239 CAROL AVENUE  
 City WARREN State MI Zip Code 48088-4772  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04464**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 356.00  
**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 1593 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LOIS N. MORRISS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 719 CHARLES STREET  
 City SOUTH AMBOY State NJ Zip Code 08879-1424  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI04465**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. LOIS N. MORRISS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 719 CHARLES STREET  
 City SOUTH AMBOY State NJ Zip Code 08879-1424  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04466**  
 Amount of Each Receipt this Period  
 120.00

**C. MRS. CHRISTY MORRISSEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 238 S. FAZIO WAY  
 City SPRING State TX Zip Code 77389-2711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NOT EMPLOYED Occupation NOT EMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04467**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 520.00  
**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 1594 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. BROOKE MORROW</b>		Date of Receipt
Mailing Address 1100 RIDGEWAY LOOP ROAD SUITE 44		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2014
City MEMPHIS	State TN	Zip Code 38120-4053
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI04468</b>
Name of Employer NEW SOUTH CAPITAL MANAGEMENT INC.		Amount of Each Receipt this Period
Occupation INVESTMENT ADVISOR		1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	1000.00	

Full Name (Last, First, Middle Initial) <b>B. MR. CHARLES H. MORSE</b>		Date of Receipt
Mailing Address 4111 E. MADISON STREET P.M.B. 260		M M M / D D D / Y Y Y Y Y Y 03 / 19 / 2014
City SEATTLE	State WA	Zip Code 98112-3241
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI04469</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		110.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	220.00	

Full Name (Last, First, Middle Initial) <b>C. MR. MICHAEL ELLIOT MORTENSON</b>		Date of Receipt
Mailing Address 619 N. 9TH STREET APARTMENT 316		M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014
City LAFAYETTE	State IN	Zip Code 47904-3510
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI04470</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		15.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	306.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1595 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL ELLIOT MORTENSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 619 N. 9TH STREET  
 APARTMENT 316  
 City LAFAYETTE State IN Zip Code 47904-3510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04471**  
 Amount of Each Receipt this Period  
 10.00

**B. MR. MICHAEL ELLIOT MORTENSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 619 N. 9TH STREET  
 APARTMENT 316  
 City LAFAYETTE State IN Zip Code 47904-3510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04472**  
 Amount of Each Receipt this Period  
 40.00

**C. MR. MICHAEL ELLIOT MORTENSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 619 N. 9TH STREET  
 APARTMENT 316  
 City LAFAYETTE State IN Zip Code 47904-3510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04473**  
 Amount of Each Receipt this Period  
 26.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 76.00  
**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 1596 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. MICHAEL ELLIOT MORTENSON**  
Mailing Address 619 N. 9TH STREET  
APARTMENT 316  
City LAFAYETTE State IN Zip Code 47904-3510  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 306.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04474**  
Amount of Each Receipt this Period  
85.00

Full Name (Last, First, Middle Initial)  
**B. MR. RICHARD MORTON**  
Mailing Address 13 MIDSHIP DRIVE  
City BARNEGAT State NJ Zip Code 08005-1416  
FEC ID number of contributing federal political committee. **C**  
Name of Employer UNEMPLOYED Occupation UNEMPLOYED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 291.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 07 / 2014  
**Transaction ID : 2014M04L11AI04475**  
Amount of Each Receipt this Period  
40.00

Full Name (Last, First, Middle Initial)  
**C. MR. RICHARD MORTON**  
Mailing Address 13 MIDSHIP DRIVE  
City BARNEGAT State NJ Zip Code 08005-1416  
FEC ID number of contributing federal political committee. **C**  
Name of Employer UNEMPLOYED Occupation UNEMPLOYED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 291.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04476**  
Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 85.00  
**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 1597 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD MORTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13 MIDSHIP DRIVE  
 City BARNEGAT State NJ Zip Code 08005-1416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNEMPLOYED Occupation UNEMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04477**  
 Amount of Each Receipt this Period  
 36.00

**B. MR. W. HUGH M. MORTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1480 DRIFT ROAD  
 City WESTPORT State MA Zip Code 02790-1620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04478**  
 Amount of Each Receipt this Period  
 500.00

**C. MRS. YOLANDA A. MORTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16262 PINEVIEW ROAD  
 City SANTA CLARITA State CA Zip Code 91387-4052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04479**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	836.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1598 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN R. MOSER**  
Full Name (Last, First, Middle Initial)

Mailing Address 515 NORTHWOOD TERRACE

City HAMILTON State OH Zip Code 45013-1422

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04480**

Amount of Each Receipt this Period  
 51.00

**B. MR. BILL MOSHOFSKY**  
Full Name (Last, First, Middle Initial)

Mailing Address 10585 S.W. 161ST COURT

City BEAVERTON State OR Zip Code 97007-8171

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04481**

Amount of Each Receipt this Period  
 101.00

**C. MR. MARVIN MOSS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2111 SYCAMORE GLEN DRIVE

City SPARKS State NV Zip Code 89434-8632

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04482**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 252.00

**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 1599 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARVIN MOSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2111 SYCAMORE GLEN DRIVE  
 City SPARKS State NV Zip Code 89434-8632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04483**  
 Amount of Each Receipt this Period  
 101.00

**B. RUSS MOSSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5925 E. SOLCITO LN.  
 City PARADISE VALLEY State AZ Zip Code 85253-4228  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation MARKETING EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04484**  
 Amount of Each Receipt this Period  
 1000.00

**C. MRS. GERTRAUD MOTLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 605 N. LOUISE STREET  
 UNIT 104  
 City GLENDALE State CA Zip Code 91206-2229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04485**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1251.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1600 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PETER R. MOUNSEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2155 E HAWTHORNE PL

City State Zip Code  
DENVER CO 80206-4116

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MAK-J ENERGY BUSINESS EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04486**

Amount of Each Receipt this Period  
25000.00

**B. PARASKEVI MOURKAKOS**  
Full Name (Last, First, Middle Initial)

Mailing Address 3273 32ND STREET

City State Zip Code  
ASTORIA NY 11106-2644

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
351.00

Date of Receipt  
03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04487**

Amount of Each Receipt this Period  
176.00

**C. MR. JOHN E. MOURRY**  
Full Name (Last, First, Middle Initial)

Mailing Address 343 4TH AVENUE

City State Zip Code  
BROOKLYN NY 11215-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04488**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 25226.00

**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 1601 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LESLIE MOWER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3189 CANYON ROAD  
 City SPRINGVILLE State UT Zip Code 84663-9538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04489**  
 Amount of Each Receipt this Period  
 440.00

**B. MR. HOWARD R. MOYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1343 W. BALTIMORE PIKE  
 APARTMENT A318  
 City MEDIA State PA Zip Code 19063-5551  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04490**  
 Amount of Each Receipt this Period  
 200.00

**C. MS. JUDY MUCASEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 103 CHERRYWOOD  
 City BELLAIRE State TX Zip Code 77401-5319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04491**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	741.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1602 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ELAINE MUELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 301 CAROLINE STREET  
 City ATHENS State WI Zip Code 54411-9251  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04492**  
 Amount of Each Receipt this Period 100.00

**B. MR. PAUL F. MUELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 380 EDISON DRIVE  
 City VERMILION State OH Zip Code 44089-3642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04493**  
 Amount of Each Receipt this Period 2500.00

**C. MR. THOMAS J. MUELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2711 COZY ACRES ROAD  
 City MOUNT PLEASANT State WI Zip Code 53406-4907  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04494**  
 Amount of Each Receipt this Period 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2720.00  
**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 1603 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS J. MUELLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2711 COZY ACRES ROAD

City MOUNT PLEASANT State WI Zip Code 53406-4907

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04495**

Amount of Each Receipt this Period  
 1.00

**B. MR. ARTHUR H. MUIR JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 1874 SUMMER CLOUD DRIVE

City THOUSAND OAKS State CA Zip Code 91362-1218

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

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  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04496**

Amount of Each Receipt this Period  
 50.00

**C. MS. MANJUJA MUKHOPEDHYAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 210 KINGSLAND AVENUE

City BROOKLYN State NY Zip Code 11222-4303

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE INVESTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 415.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04497**

Amount of Each Receipt this Period  
 415.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 466.00

**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 1604 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN P. MULLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 564 GLEN OAK ROAD

City VENICE State FL Zip Code 34293-1100

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04498**

Amount of Each Receipt this Period  
 500.00

**B. MR. JOHN P. MULLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 564 GLEN OAK ROAD

City VENICE State FL Zip Code 34293-1100

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04499**

Amount of Each Receipt this Period  
 500.00

**C. MR. JOHN L. MULLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 18937 RINGLING STREET

City TARZANA State CA Zip Code 91356-4018

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04500**

Amount of Each Receipt this Period  
 135.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1135.00

**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 1605 OF 2949	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. H. MICHAEL MULLINIX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4712 HIBISCUS AVENUE  
 City EDINA State MN Zip Code 55435-4002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04501**  
 Amount of Each Receipt this Period  
 55.00

**B. MR. H. MICHAEL MULLINIX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4712 HIBISCUS AVENUE  
 City EDINA State MN Zip Code 55435-4002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04502**  
 Amount of Each Receipt this Period  
 56.00

**C. MR. JAMES R. MULVIHILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 518 17TH STREET  
 17TH FLOOR  
 City DENVER State CO Zip Code 80202-4130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BLACK CREEK CAPITAL Occupation REAL ESTATE INVESTMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04503**  
 Amount of Each Receipt this Period  
 32400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	32511.00
<b>TOTAL</b> This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1606 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SALVATORE P. MUNACO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 741 SHELDEN ROAD  
 City State Zip Code  
 GROSE POINTE SHORES MI 48236-1510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED GROCER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI04504**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. SALVATORE P. MUNACO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 741 SHELDEN ROAD  
 City State Zip Code  
 GROSE POINTE SHORES MI 48236-1510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED GROCER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04505**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. BEVERLEY B. MUNFORD III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 113 TEMPSFORD LANE  
 City State Zip Code  
 RICHMOND VA 23226-2318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DAVENPORT AND COMPANY STOCKBROKER  
 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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04506**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	301.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1607 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BEVERLEY B. MUNFORD III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 113 TEMPSFORD LANE  
 City State Zip Code  
 RICHMOND VA 23226-2318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DAVENPORT AND COMPANY STOCKBROKER  
 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  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04507**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. DELORES I. MURCHINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 40691  
 City State Zip Code  
 SAN FRANCISCO CA 94140-0691  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED H.H.A.  
 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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04508**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. DAVID A. MURCHISON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 119  
 City State Zip Code  
 CASANOVA VA 20139-0119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NXL TRAFFIC ENGINEER  
 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  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04509**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00  
**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 1608 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAY H. MURDOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 755 CASTLE BLVD.  
 City AKRON State OH Zip Code 44313-5709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04510**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. ROY MURDOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4000 POINT WHITE DRIVE NE  
 City BAINBRIDGE ISLAND State WA Zip Code 98110-4052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04511**  
 Amount of Each Receipt this Period  
 205.00

**C. MR. SAMUEL C. MURDOUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5801 BENT PINE DRIVE  
 City VERO BEACH State FL Zip Code 32967-7589  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04512**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	605.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1609 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SAMUEL C. MURDOUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5801 BENT PINE DRIVE  
 City VERO BEACH State FL Zip Code 32967-7589  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04513**  
 Amount of Each Receipt this Period 200.00

**B. MRS. SUZANNE MURIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 850 N. WASHINGTON STREET  
 City HINSDALE State IL Zip Code 60521-2848  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04514**  
 Amount of Each Receipt this Period 500.00

**C. MRS. ANN E. MURPHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1001 LIBERTY AVENUE  
 C/O THE BEECHWOOD COMPANY  
 City PITTSBURGH State PA Zip Code 15222-3715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STUDENT Occupation STUDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5046.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04515**  
 Amount of Each Receipt this Period 5046.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5746.00  
**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 1610 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRIAN MURPHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11405 LOCKSHIRE DRIVE  
 City FRISCO State TX Zip Code 75035-3773  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FOX FINANCIAL MANAGEMENT Occupation STOCKBROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04516**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. BRIAN MURPHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11405 LOCKSHIRE DRIVE  
 City FRISCO State TX Zip Code 75035-3773  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FOX FINANCIAL MANAGEMENT Occupation STOCKBROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04517**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. DAVID M. MURPHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4311 CROFTON COURT  
 City FORT WAYNE State IN Zip Code 46835-2283  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04518**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 321.00  
**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 1611 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JEANETTE R. MURPHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15925 ALTA VISTA DRIVE  
 UNIT B.  
 City LA MIRADA State CA Zip Code 90638-3265  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04519**  
 Amount of Each Receipt this Period  
 50.00

**B. MS. JEANETTE R. MURPHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15925 ALTA VISTA DRIVE  
 UNIT B.  
 City LA MIRADA State CA Zip Code 90638-3265  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04520**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. JOHN J. MURPHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 74 MELROSE DRIVE  
 City PAINESVILLE State OH Zip Code 44077-1409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04521**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1612 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. STEPHEN MURPHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10615 SO. FIR AVE  
 City JENKS State OK Zip Code 74037-3027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer YORKTOWN BUILDERS, LLC Occupation REAL ESTATE  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04522**  
 Amount of Each Receipt this Period  
 300.00

**B. MS. BARBARA MURRAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 242 GEIGEL HILL ROAD  
 City UPPER BLACK EDDY State PA Zip Code 18972-9553  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TONICKON CORPORATION Occupation PRESIDENT  
 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  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04523**  
 Amount of Each Receipt this Period  
 30.00

**C. MS. BARBARA MURRAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 242 GEIGEL HILL ROAD  
 City UPPER BLACK EDDY State PA Zip Code 18972-9553  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TONICKON CORPORATION Occupation PRESIDENT  
 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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04524**  
 Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 360.00  
**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 1613 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. C. A. MURRAY JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 214 W. TURBO DRIVE

City SAN ANTONIO State TX Zip Code 78216-3312

FEC ID number of contributing federal political committee. **C**

Name of Employer SAN ANTONIO FLOOR FINISHING, INC. Occupation C.O.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04525**

Amount of Each Receipt this Period  
 1.00

**B. MR. DANIEL MURRAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 4239 OSBORN ROAD

City DALLAS State TX Zip Code 75227-1761

FEC ID number of contributing federal political committee. **C**

Name of Employer RESEARCH IN MOTION Occupation ATTORNEY

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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04526**

Amount of Each Receipt this Period  
 400.00

**C. MR. EUGENE PATRICK MURRAY**  
Full Name (Last, First, Middle Initial)

Mailing Address E9005 HUCKLBERRY LANE

City NEW LONDON State WI Zip Code 54961-8954

FEC ID number of contributing federal political committee. **C**

Name of Employer SCOTT CONSTRUCTION, INC. Occupation REGIONAL MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04527**

Amount of Each Receipt this Period  
 125.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	526.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1614 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. COLONEL JOHN E. MURRAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10006 RHINELAND APARTMENT 218  
 City SAN ANTONIO State TX Zip Code 78239-3140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04528**  
 Amount of Each Receipt this Period 50.00

**B. COLONEL JOHN E. MURRAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10006 RHINELAND APARTMENT 218  
 City SAN ANTONIO State TX Zip Code 78239-3140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 445.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04529**  
 Amount of Each Receipt this Period 50.00

**C. MR. ROBERT MUSCHA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2877 LILAC LANE N.  
 City FARGO State ND Zip Code 58102-1706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04530**  
 Amount of Each Receipt this Period 220.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	320.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1615 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. ROBERT L. MUSHEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1370

City CANNON BEACH	State OR	Zip Code 97110-1370
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04531**

Amount of Each Receipt this Period  
 221.00

**B. MS. SHARON MUZIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20094 HERITAGE POINT DRIVE

City TAMPA	State FL	Zip Code 33647-3343
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04532**

Amount of Each Receipt this Period  
 21.00

**C. MS. SHARON MUZIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20094 HERITAGE POINT DRIVE

City TAMPA	State FL	Zip Code 33647-3343
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04533**

Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	252.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1616 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHRISTIAN W. MYERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2121 WEST MAIN ROAD  
 APARTMENT 605  
 City PORTSMOUTH State RI Zip Code 02871-1045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04534**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. CHRISTIAN W. MYERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2121 WEST MAIN ROAD  
 APARTMENT 605  
 City PORTSMOUTH State RI Zip Code 02871-1045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04535**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. CURT MYERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7634 HIGHWAY 75 S.  
 City MOORHEAD State MN Zip Code 56560-7605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNEMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04536**  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 251.00  
**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 1617 OF 2949
	(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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. CURT MYERS**

Mailing Address 7634 HIGHWAY 75 S.

City MOORHEAD	State MN	Zip Code 56560-7605
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer UNEMPLOYED	Occupation REQUESTED
--------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04537**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. GARY MYERS**

Mailing Address P.O. BOX 1016

City EDMOND	State OK	Zip Code 73083-1016
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MYERS & MYERS, INC.	Occupation PETROLEUM LANDMAN
---	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04538**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MR. JAMES MYERS**

Mailing Address 514 AMERICAS WAY # 2846

City BOX ELDER	State SD	Zip Code 57719-7600
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04539**

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1050.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1618 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. JUDY MYERS**

Mailing Address 20156 VIKING CREST NE  
APARTMENT 7-101

City POULSBO State WA Zip Code 98370-7592

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04540**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. RONALD L. MYERS**

Mailing Address P.O. BOX 92

City EAGLE CREEK State OR Zip Code 97022-0092

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04541**

Amount of Each Receipt this Period  
15.00

Full Name (Last, First, Middle Initial)  
**C. MR. RONALD W. MYERS**

Mailing Address 901 E. FIREWEED LANE

City ANCHORAGE State AK Zip Code 99508-3936

FEC ID number of contributing federal political committee. **C**

Name of Employer ANCHORAGE SAND & GRAVEL Occupation MECHANIC

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
491.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04542**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 140.00

**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 1619 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. RONALD W. MYERS</b>		Date of Receipt
Mailing Address 901 E. FIREWEED LANE		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : 2014M04L11AI04543</b>
ANCHORAGE	AK	Amount of Each Receipt this Period
Zip Code		<input type="text" value="25.00"/>
99508-3936		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
ANCHORAGE SAND & GRAVEL	MECHANIC	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="491.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. RONALD W. MYERS</b>		Date of Receipt
Mailing Address 901 E. FIREWEED LANE		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : 2014M04L11AI04544</b>
ANCHORAGE	AK	Amount of Each Receipt this Period
Zip Code		<input type="text" value="25.00"/>
99508-3936		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
ANCHORAGE SAND & GRAVEL	MECHANIC	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="491.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. RONALD W. MYERS</b>		Date of Receipt
Mailing Address 901 E. FIREWEED LANE		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : 2014M04L11AI04545</b>
ANCHORAGE	AK	Amount of Each Receipt this Period
Zip Code		<input type="text" value="25.00"/>
99508-3936		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
ANCHORAGE SAND & GRAVEL	MECHANIC	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="491.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 1620 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD W. MYERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 901 E. FIREWEED LANE  
 City ANCHORAGE State AK Zip Code 99508-3936  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ANCHORAGE SAND & GRAVEL Occupation MECHANIC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 491.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04546**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. RONALD W. MYERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 901 E. FIREWEED LANE  
 City ANCHORAGE State AK Zip Code 99508-3936  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ANCHORAGE SAND & GRAVEL Occupation MECHANIC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 491.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04547**  
 Amount of Each Receipt this Period  
 26.00

**C. MR. RONALD W. MYERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 901 E. FIREWEED LANE  
 City ANCHORAGE State AK Zip Code 99508-3936  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ANCHORAGE SAND & GRAVEL Occupation MECHANIC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 491.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04548**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	76.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1621 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD W. MYERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 901 E. FIREWEED LANE  
 City ANCHORAGE State AK Zip Code 99508-3936  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ANCHORAGE SAND & GRAVEL Occupation MECHANIC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 491.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04549**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. VARR MYERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9805 N. VALLEY FARMS ROAD  
 City COOLIDGE State AZ Zip Code 85128-9327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04550**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. WALTER E. MYERS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3818 SUGARLOAF PARKWAY  
 City FREDERICK State MD Zip Code 21704-7900  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MONTGOMERY COUNTY Occupation PERMIT TECHNICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04551**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	245.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1622 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE L. MYLANDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 155 SUNSET DRIVE  
 City SANDUSKY State OH Zip Code 44870-5224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04552**  
 Amount of Each Receipt this Period 100.00

**B. MR. ALFRED H. NADER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3519 RODESCO COURT SE  
 City PUYALLUP State WA Zip Code 98374-5120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04553**  
 Amount of Each Receipt this Period 220.00

**C. DR. PURUSHOTTAM NAIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6113 BROOKSTONE LANE  
 City GRAND BLANC State MI Zip Code 48439-9433  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04554**  
 Amount of Each Receipt this Period 220.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 540.00  
**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 1623 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY NAJARIAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 463 SUMMIT STREET

City ENGLEWOOD CLIFFS State NJ Zip Code 07632-1715

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04555**

Amount of Each Receipt this Period  
 1.00

**B. MRS. MARY NAJARIAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 463 SUMMIT STREET

City ENGLEWOOD CLIFFS State NJ Zip Code 07632-1715

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04556**

Amount of Each Receipt this Period  
 150.00

**C. VIRGINIA NALBANTU**  
Full Name (Last, First, Middle Initial)

Mailing Address 770 NE 36 STREET

City BOCA RATON State FL Zip Code 33431-6138

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04557**

Amount of Each Receipt this Period  
 25000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25151.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1624 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. TERESA B. NALLY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1265 S. GRAND AVENUE  
 City PASADENA State CA Zip Code 91105-2835  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04558**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. KI HYON NAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2912 WEST 12TH STREET  
 City LOS ANGELES State CA Zip Code 90006-3110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 402.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04559**  
 Amount of Each Receipt this Period  
 110.00

**C. MR. KI HYON NAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2912 WEST 12TH STREET  
 City LOS ANGELES State CA Zip Code 90006-3110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 402.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04560**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	320.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1625 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KI HYON NAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2912 WEST 12TH STREET  
 City LOS ANGELES State CA Zip Code 90006-3110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 402.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04561**  
 Amount of Each Receipt this Period  
 111.00

**B. MR. KI HYON NAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2912 WEST 12TH STREET  
 City LOS ANGELES State CA Zip Code 90006-3110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 402.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04562**  
 Amount of Each Receipt this Period  
 36.00

**C. MRS. MADELINE H. NAPPEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 229 HAZELTINE CIRCLE  
 City BLUE BELL State PA Zip Code 19422-3261  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NAPPEN & ASSOCIATES Occupation REAL ESTATE DEVELOPER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04563**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 397.00  
**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 1626 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SHARON SUE NAUGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1916 SARAH LANE  
 City State Zip Code  
 JEFFERSON CITY MO 65101-2355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A NONE  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04564**  
 Amount of Each Receipt this Period  
 275.00

**B. MRS. SHARON SUE NAUGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1916 SARAH LANE  
 City State Zip Code  
 JEFFERSON CITY MO 65101-2355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A NONE  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04565**  
 Amount of Each Receipt this Period  
 275.00

**C. MRS. ANNA B. NAUMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 60291  
 City State Zip Code  
 OKLAHOMA CITY OK 73146-0291  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED INVESTMENT MANAGER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04566**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00  
**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 1627 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SALVADOR NAVA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6005 LUXOR STREET  
 City SOUTH GATE State CA Zip Code 90280-3810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04567**  
 Amount of Each Receipt this Period  
 130.00

**B. MR. JIM H. NEAL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1676  
 City ADA State OK Zip Code 74821-1676  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04568**  
 Amount of Each Receipt this Period  
 180.00

**C. MR. THOMAS H. NEALE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2325 42ND STREET NW  
 APARTMENT 404  
 City WASHINGTON State DC Zip Code 20007-4958  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE LIBRARY OF CONGRESS Occupation POLICY ANALYST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04569**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 560.00  
**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 1628 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TIM NEDBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8113 E. MCMELLAN BLVD.  
 City SCOTTSDALE State AZ Zip Code 85250-5647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer P.K. ASSOCIATES Occupation STRUCTURAL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04570**  
 Amount of Each Receipt this Period 100.00

**B. MR. DAVID C. NEDDERMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5644 ROYAL TROON WAY  
 City AVON State IN Zip Code 46123-8147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04571**  
 Amount of Each Receipt this Period 275.00

**C. MR. MILAN NEDOVICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6804 JOLIET ROAD APARTMENT 3F  
 City INDIAN HEAD PARK State IL Zip Code 60525-4462  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 322.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04572**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 425.00  
**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 1629 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MILAN NEDOVICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6804 JOLIET ROAD  
 APARTMENT 3F  
 City INDIAN HEAD PARK State IL Zip Code 60525-4462  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 322.00

Date of Receipt  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04573**  
 Amount of Each Receipt this Period  
 110.00

**B. MR. MILAN NEDOVICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6804 JOLIET ROAD  
 APARTMENT 3F  
 City INDIAN HEAD PARK State IL Zip Code 60525-4462  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 322.00

Date of Receipt  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04574**  
 Amount of Each Receipt this Period  
 2.00

**C. MR. FRANK H. NEELY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21 BELMEADE TERRACE  
 City UNIONTOWN State PA Zip Code 15401-5237  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04575**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	162.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1630 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANK H. NEELY**  
Full Name (Last, First, Middle Initial)

Mailing Address 21 BELMEADE TERRACE

City UNIONTOWN State PA Zip Code 15401-5237

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04576**

Amount of Each Receipt this Period  
 25.00

**B. MR. FRANK H. NEELY**  
Full Name (Last, First, Middle Initial)

Mailing Address 21 BELMEADE TERRACE

City UNIONTOWN State PA Zip Code 15401-5237

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04577**

Amount of Each Receipt this Period  
 26.00

**C. MR. FRANK H. NEELY**  
Full Name (Last, First, Middle Initial)

Mailing Address 21 BELMEADE TERRACE

City UNIONTOWN State PA Zip Code 15401-5237

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04578**

Amount of Each Receipt this Period  
 40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 91.00

**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 1631 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. ROBERT A. NEFF</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 04 / 2014 <b>Transaction ID : 2014M04L11AI04579</b>
Mailing Address P.O. BOX 577		Amount of Each Receipt this Period 220.00
City PINEHURST	State NC	Zip Code 28370-0577
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>B. MR. ROGER NEGIN</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014 <b>Transaction ID : 2014M04L11AI04580</b>
Mailing Address 108 DEVONSHIRE COURT		Amount of Each Receipt this Period 120.00
City ELYRIA	State OH	Zip Code 44035-3038
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.00	

Full Name (Last, First, Middle Initial) <b>C. MR. ROGER NEGIN</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI04581</b>
Mailing Address 108 DEVONSHIRE COURT		Amount of Each Receipt this Period 1.00
City ELYRIA	State OH	Zip Code 44035-3038
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	341.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1632 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. VIRGINIA NEHRING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 213 BEACON LANDING  
 City TINTON FALLS State NJ Zip Code 07753-7752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04582**  
 Amount of Each Receipt this Period 50.00

**B. MRS. VIRGINIA NEHRING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 213 BEACON LANDING  
 City TINTON FALLS State NJ Zip Code 07753-7752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04583**  
 Amount of Each Receipt this Period 1.00

**C. MRS. JANNEKE S. NEILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 71 PASTURE LANE  
 City BRYN MAWR State PA Zip Code 19010-1763  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04584**  
 Amount of Each Receipt this Period 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 52.00  
**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 1633 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DAVID NEISLER**

Mailing Address P.O. BOX 227

City EL PASO State IL Zip Code 61738-0227

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : 2014M04L11AI04585**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. MRS. ANNE PAGE NELSON**

Mailing Address 528 OLD ORCHARD DRIVE

City DANVILLE State CA Zip Code 94526-3654

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**

**Transaction ID : 2014M04L11AI04586**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. MRS. ANNE PAGE NELSON**

Mailing Address 528 OLD ORCHARD DRIVE

City DANVILLE State CA Zip Code 94526-3654

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**

**Transaction ID : 2014M04L11AI04587**

Amount of Each Receipt this Period  
**200.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>350.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1634 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID W. NELSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2771 BANBURY LN.  
 City SAN CARLOS State CA Zip Code 94070-4313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04588**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. H. DONALD NELSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4312 SOUTHBURY SQUARE  
 City WILLIAMSBURG State VA Zip Code 23188-2857  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04589**  
 Amount of Each Receipt this Period  
 1.00

**C. MRS. JEAN C. NELSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1516 MAIN STREET  
 City WILLISTON State ND Zip Code 58801-4241  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04590**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	351.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1635 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN M. NELSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8834 S. LOS FELIZ DRIVE  
 City TEMPE State AZ Zip Code 85284-3430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04591**  
 Amount of Each Receipt this Period 110.00

**B. MR. KENNETH NELSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 230  
 City PERHAM State MN Zip Code 56573-0230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04592**  
 Amount of Each Receipt this Period 1000.00

**C. MR. ROBERT G. NELSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2714 WESTERN OAK DRIVE  
 City REDDING State CA Zip Code 96002-5114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04593**  
 Amount of Each Receipt this Period 60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1170.00  
**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 1636 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT G. NELSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2714 WESTERN OAK DRIVE

City REDDING State CA Zip Code 96002-5114

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04594**

Amount of Each Receipt this Period  
 61.00

**B. MR. ROBERT G. NELSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2714 WESTERN OAK DRIVE

City REDDING State CA Zip Code 96002-5114

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04595**

Amount of Each Receipt this Period  
 60.00

**C. MR. ROBERT K. NELSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1008 E. 6TH AVENUE

City HOUGHTON State MI Zip Code 49931-1432

FEC ID number of contributing federal political committee. **C**

Name of Employer EDWARD JONES Occupation FINANCIAL ADVISOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04596**

Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 241.00

**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 1637 OF 2949  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ROBERT K. NELSON**  
Mailing Address 1008 E. 6TH AVENUE  
City State Zip Code  
HOUGHTON MI 49931-1432  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
EDWARD JONES FINANCIAL ADVISOR  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
**370.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 27 / 2014**  
**Transaction ID : 2014M04L11AI04597**  
Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**B. MS. RUTH L. NELSON**  
Mailing Address 1116 MACE AVENUE  
City State Zip Code  
BRONX NY 10469-5305  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
RETIRED RETIRED  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
**290.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 05 / 2014**  
**Transaction ID : 2014M04L11AI04598**  
Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. MS. RUTH L. NELSON**  
Mailing Address 1116 MACE AVENUE  
City State Zip Code  
BRONX NY 10469-5305  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
RETIRED RETIRED  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
**290.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 06 / 2014**  
**Transaction ID : 2014M04L11AI04599**  
Amount of Each Receipt this Period  
**50.00**

**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: PAGE 1638 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. MARK A. NESCI**

Mailing Address 3 ELKINS COURT

City State Zip Code  
PRINCETON NJ 08550-2219

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04600**

Amount of Each Receipt this Period  
750.00

Full Name (Last, First, Middle Initial)  
**B. MR. PHILLIP J. NESSLER**

Mailing Address 507 BORA BORA DRIVE

City State Zip Code  
GALVESTON TX 77554-6113

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04601**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MR. DALLAS G. NESTER**

Mailing Address 225 CREEKSIDE EAST DRIVE

City State Zip Code  
WILMINGTON NC 28411-6873

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED SALES

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04602**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 970.00

**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 1639 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. FOREST R. NESTER</b>		Date of Receipt
Mailing Address 716 BRINSON ARCH		M M M / D D D / Y Y Y Y Y Y 03 / 11 / 2014
City	State	Zip Code
VIRGINIA BEACH	VA	23455-5810
FEC ID number of contributing federal political committee.	C	<b>Transaction ID : 2014M04L11AI04603</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	750.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	820.00	

Full Name (Last, First, Middle Initial) <b>B. MR. E. H. NETHERCUTT</b>		Date of Receipt
Mailing Address 4310 PERIWINKLE LANE		M M M / D D D / Y Y Y Y Y Y 03 / 27 / 2014
City	State	Zip Code
WOODBIDGE	VA	22192-5108
FEC ID number of contributing federal political committee.	C	<b>Transaction ID : 2014M04L11AI04604</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	100.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	210.00	

Full Name (Last, First, Middle Initial) <b>C. MR. WILLIAM R. NETHERTON</b>		Date of Receipt
Mailing Address 150 MOORINGS PARK DRIVE APARTMENT 403		M M M / D D D / Y Y Y Y Y Y 03 / 18 / 2014
City	State	Zip Code
NAPLES	FL	34105-2120
FEC ID number of contributing federal political committee.	C	<b>Transaction ID : 2014M04L11AI04605</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	100.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1640 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. VERN NETTESHEIM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27 GULLS COVE  
 City State Zip Code  
 MANHASSET NY 11030-1010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04606**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. VERN NETTESHEIM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27 GULLS COVE  
 City State Zip Code  
 MANHASSET NY 11030-1010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04607**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. FRANCIS P. NETTLES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2308 BRIARMOOR DRIVE  
 City State Zip Code  
 MONROE LA 71201-2342  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED MECH TECH  
 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  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04608**  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 651.00  
**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 1641 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. PAUL NEUHOFF**

Mailing Address 2918 MARSHALL

City State Zip Code  
SULLIVANS ISLAND SC 29482-9637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
GSP MARKETING TECHNOLOGIES CHAIRMAN

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  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04609**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. LAWRENCE M. NEUMANN**

Mailing Address 3621 WYNN DRIVE  
APARTMENT 1

City State Zip Code  
EDMOND OK 73013-4613

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
601.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04610**

Amount of Each Receipt this Period  
601.00

Full Name (Last, First, Middle Initial)  
**C. MRS. BARBARA B. NEUROHR**

Mailing Address 11350 WOODSTOCK ROAD  
APARTMENT 1355

City State Zip Code  
ROSWELL GA 30075-7535

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04611**

Amount of Each Receipt this Period  
70.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 771.00

**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 1642 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. BARBARA B. NEUROHR**

Mailing Address 11350 WOODSTOCK ROAD  
APARTMENT 1355

City ROSWELL State GA Zip Code 30075-7535

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04612**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT C. NEVIN**

Mailing Address 406 OCEAN OAKS STREET

City KIAWAH ISLAND State SC Zip Code 29455-5932

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04613**

Amount of Each Receipt this Period  
101.00

Full Name (Last, First, Middle Initial)  
**C. MR. CRAWFORD NEVINS**

Mailing Address 5386 MEADOW BROOK ROAD

City BIRMINGHAM State AL Zip Code 35242-3315

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04614**

Amount of Each Receipt this Period  
251.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	353.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1643 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. GREGORY R. NEW</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI04615</b>
Mailing Address 5968 PARK LAKE ROAD APARTMENT 312		Amount of Each Receipt this Period 1000.00
City EAST LANSING	State MI	Zip Code 48823-9206
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. MR. TOM T. W. NEW</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 13 / 2014 <b>Transaction ID : 2014M04L11AI04616</b>
Mailing Address P.O. BOX 161211		Amount of Each Receipt this Period 65.00
City HONOLULU	State HI	Zip Code 96816-0926
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

Full Name (Last, First, Middle Initial) <b>C. MR. TOM T. W. NEW</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2014 <b>Transaction ID : 2014M04L11AI04617</b>
Mailing Address P.O. BOX 161211		Amount of Each Receipt this Period 75.00
City HONOLULU	State HI	Zip Code 96816-0926
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1140.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1644 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. NEWCASTLE VENTURES, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7367 SARIMENTO PLACE  
 City DELRAY BEACH State FL Zip Code 33446-4415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04618**  
 Amount of Each Receipt this Period  
 50000.00

**B. MR. JOHN W. NEWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 48 MEADOW COVE ROAD  
 City PITTSFORD State NY Zip Code 14534-3351  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04619**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. ROBERT W. NEWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 HOLMES STREET  
 City NEWPORT State AR Zip Code 72112-4046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04620**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1645 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PAUL B. NEWHOUSE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24600 S. TAMIAMI TRAIL  
 SUITE 212  
 City State Zip Code  
 BONITA SPRINGS FL 34134-7023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 GUY CARPENTER & COMPANY, L.L.C. REINSURANCE BROKER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04621**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. WHITNEY NEWLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1924 ANACAPA STREET  
 City State Zip Code  
 SANTA BARBARA CA 93101-1031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04622**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. WHITNEY NEWLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1924 ANACAPA STREET  
 City State Zip Code  
 SANTA BARBARA CA 93101-1031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04623**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1170.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1646 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES A. NEWMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 129 PARK DRIVE  
 City TAVARES State FL Zip Code 32778-4116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04624**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. CHARLES A. NEWMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 129 PARK DRIVE  
 City TAVARES State FL Zip Code 32778-4116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04625**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. DALE E. NEWMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4815 WINDY BROOK LANE  
 City KATY State TX Zip Code 77449-6099  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HALLIBURTON Occupation SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04626**  
 Amount of Each Receipt this Period  
 100.00

**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 1647 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DALE E. NEWMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4815 WINDY BROOK LANE  
 City KATY State TX Zip Code 77449-6099  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HALLIBURTON Occupation SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04627**  
 Amount of Each Receipt this Period 100.00

**B. MR. DAVID T. NEWMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24 W. 10TH STREET  
 City NEW YORK State NY Zip Code 10011-8702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NEW YORK UNIVERSITY Occupation RESEARCH SCIENTIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04628**  
 Amount of Each Receipt this Period 500.00

**C. MR. EDSEL NEWMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13428 160TH AVENUE N.E.  
 City REDMOND State WA Zip Code 98052-1754  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04629**  
 Amount of Each Receipt this Period 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1648 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOSEPH NEWTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14703 EAGLE VISTA DRIVE  
 APARTMENT 2125  
 City HOUSTON State TX Zip Code 77077-5394  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04630**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. KAREN LORRAINE NEWTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6515 N. SPOKANE AVENUE  
 City CHICAGO State IL Zip Code 60646-2919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04631**  
 Amount of Each Receipt this Period  
 30.00

**C. MRS. KAREN LORRAINE NEWTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6515 N. SPOKANE AVENUE  
 City CHICAGO State IL Zip Code 60646-2919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04632**  
 Amount of Each Receipt this Period  
 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	560.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1649 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARIE B. NEWTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8603 SE CAUSEY AVENUE  
 APARTMENT 312  
 City HAPPY VALLEY State OR Zip Code 97086-2605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04633**  
 Amount of Each Receipt this Period  
 120.00

**B. MRS. MARIE B. NEWTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8603 SE CAUSEY AVENUE  
 APARTMENT 312  
 City HAPPY VALLEY State OR Zip Code 97086-2605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04634**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. GARY L. NEWTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1919 AUTUMN CREST LANE  
 City KALAMAZOO State MI Zip Code 49008-4810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04635**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	221.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1650 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GARY L. NEWTSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1919 AUTUMN CREST LANE

City KALAMAZOO State MI Zip Code 49008-4810

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04636**

Amount of Each Receipt this Period  
 200.00

**B. MR. B. A. NGUYEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1411 WARD STREET

City BALTIMORE State MD Zip Code 21230-1822

FEC ID number of contributing federal political committee. **C**

Name of Employer DISPLAY CRAFT COMPANY Occupation WOODWORK

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04637**

Amount of Each Receipt this Period  
 50.00

**C. MR. B. A. NGUYEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1411 WARD STREET

City BALTIMORE State MD Zip Code 21230-1822

FEC ID number of contributing federal political committee. **C**

Name of Employer DISPLAY CRAFT COMPANY Occupation WOODWORK

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04638**

Amount of Each Receipt this Period  
 50.00

**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 1651 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. B. A. NGUYEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1411 WARD STREET  
 City BALTIMORE State MD Zip Code 21230-1822  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISPLAY CRAFT COMPANY Occupation WOODWORK  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04639**  
 Amount of Each Receipt this Period 51.00

**B. DR. LEE K. NGUYEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3750 CLUBSIDE LANE  
 City SACRAMENTO State CA Zip Code 95835-2008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer L.R.M. Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04640**  
 Amount of Each Receipt this Period 120.00

**C. DR. LEE K. NGUYEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3750 CLUBSIDE LANE  
 City SACRAMENTO State CA Zip Code 95835-2008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer L.R.M. Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04641**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 271.00  
**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 1652 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. LOI LE NGUYEN**

Mailing Address 6321 CARTHAGE STREET

City State Zip Code  
FORT SMITH AR 72903-4935

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
TYSON FOODS, INC. WORKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04642**

Amount of Each Receipt this Period  
245.00

Full Name (Last, First, Middle Initial)  
**B. MR. GARY NIBLOCK**

Mailing Address 10881 SEVER COOK ROAD

City State Zip Code  
WHITE PIGEON MI 49099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED BUSINESS OWNER

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  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04643**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. MR. ANDRE NICHOLAS**

Mailing Address 12070 LAKE TRAIL DRIVE

City State Zip Code  
ARGYLE TX 76226-4535

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N.E. CONSTRUCTION CONSTRUCTION / V.P.

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  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI04644**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 595.00

**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 1653 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. PETER M. NICHOLAS SR.</b>		Date of Receipt
Mailing Address PO BOX 1558		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City State Zip Code BOCA GRANDE FL 33921-1558		<b>Transaction ID : 2014M04L11AI04645</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="15000.00"/>
Name of Employer BOSTON SCIENTIFIC CORPORATION	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="15000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MS. POLLY NICHOLS</b>		Date of Receipt
Mailing Address 7011 NORTH COUNTRY CLUB DRIVE		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City State Zip Code OKLAHOMA CITY OK 73116-4405		<b>Transaction ID : 2014M04L11AI04646</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="32400.00"/>
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="32400.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. RONALD DEAN NICHOLS</b>		Date of Receipt
Mailing Address P.O. BOX 4242		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code DOWNEY CA 90241-1242		<b>Transaction ID : 2014M04L11AI04647</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="120.00"/>
Name of Employer COMMERCE CASINO	Occupation ENTERTAINMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="370.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="47520.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 1654 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD DEAN NICHOLS**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 4242

City State Zip Code  
DOWNEY CA 90241-1242

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
COMMERCE CASINO ENTERTAINMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
370.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04648**

Amount of Each Receipt this Period  
100.00

**B. MR. DOUGLASS OWEN NICHOLSON**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 730

City State Zip Code  
MANZANITA OR 97130-0730

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04649**

Amount of Each Receipt this Period  
1.00

**C. MR. PAUL C. NICHOLSON JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 288 BLACKSTONE BOULEVARD

City State Zip Code  
PROVIDENCE RI 02906-4864

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04650**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 601.00

**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 1655 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILL F. NICHOLSON JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 950 17TH STREET  
 FLOOR 12  
 City DENVER State CO Zip Code 80202-2815  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04651**  
 Amount of Each Receipt this Period  
 750.00

**B. MRS. GRACE NICOLETTI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 52 MARINE STREET  
 City BRONX State NY Zip Code 10464-1622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 452.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04652**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. GRACE NICOLETTI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 52 MARINE STREET  
 City BRONX State NY Zip Code 10464-1622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 452.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04653**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1656 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. GRACE NICOLETTI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 52 MARINE STREET  
 City BRONX State NY Zip Code 10464-1622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 452.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04654**  
 Amount of Each Receipt this Period  
 102.00

**B. MRS. GRACE NICOLETTI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 52 MARINE STREET  
 City BRONX State NY Zip Code 10464-1622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 452.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04655**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JACOB NIEDERQUELL III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19745 W. BELMONT AVENUE  
 City KERMAN State CA Zip Code 93630-9338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04656**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	352.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1657 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JANET S. NIEHAUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 894 VAN HORN WAY  
 City EL CAJON State CA Zip Code 92019-3518  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LEARNING EVOLUTION Occupation PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 551.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04657**  
 Amount of Each Receipt this Period  
 550.00

**B. MRS. JANET S. NIEHAUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 894 VAN HORN WAY  
 City EL CAJON State CA Zip Code 92019-3518  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LEARNING EVOLUTION Occupation PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 551.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04658**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. JAMES A. NIETOPSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 95 PFOHL PLACE  
 City WILLIAMSVILLE State NY Zip Code 14221-6821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04659**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 671.00  
**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 1658 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. ROBERT P. NIRSCHL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4143 N. RIVER STREET  
 City MC LEAN State VA Zip Code 22101-5819  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NIRSCHL ORTHOPEDIC CENTER Occupation DOCTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04660**  
 Amount of Each Receipt this Period 101.00

**B. MRS. HAROLDINE NISBET**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32174 207TH STREET  
 City LEAVENWORTH State KS Zip Code 66048-6423  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04661**  
 Amount of Each Receipt this Period 120.00

**C. MR. NORMAN C. NITSCHKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29737 E. RIVER ROAD  
 City PERRYSBURG State OH Zip Code 43551-3426  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04662**  
 Amount of Each Receipt this Period 2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2221.00  
**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 1659 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. NANCY A NOBLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 556 E PURPLE LILAC LANE

City SANDY State UT Zip Code 84070-6200

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation PROFESSOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04663**

Amount of Each Receipt this Period  
 500.00

**B. DR. R. JOE NOBLE**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2900

City EDWARDS State CO Zip Code 81632-2900

FEC ID number of contributing federal political committee. **C**

Name of Employer THE CARE GROUP, L.L.C. Occupation MEDICAL DOCTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04664**

Amount of Each Receipt this Period  
 1.00

**C. MISS GWEN NOCERINI**  
Full Name (Last, First, Middle Initial)

Mailing Address 121 2ND AVENUE S.E.

City RONAN State MT Zip Code 59864-2830

FEC ID number of contributing federal political committee. **C**

Name of Employer UNEMPLOYED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04665**

Amount of Each Receipt this Period  
 60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 561.00

**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 1660 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MISS GWEN NOCERINI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 121 2ND AVENUE S.E.  
 City RONAN State MT Zip Code 59864-2830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNEMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04666**  
 Amount of Each Receipt this Period  
 61.00

**B. MR. JACKSON NOEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 7  
 City BUFFALO State WV Zip Code 25033-0007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04667**  
 Amount of Each Receipt this Period  
 500.00

**C. MS. CAROL I. NOFZIGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 701 SILVER OAK DRIVE  
 City GLENWOOD SPRINGS State CO Zip Code 81601-2842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04668**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	811.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1661 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES M. NOLAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8820 WALTHER BLVD.  
 APARTMENT 4519  
 City PARKVILLE State MD Zip Code 21234-9025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04669**  
 Amount of Each Receipt this Period  
 220.00

**B. MS. REBECCA L. NOLTE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4103 S BURRELL ST.  
 City MILWAUKEE State WI Zip Code 53207-4405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer W.B. BOTTLE SUPPLY CO. Occupation FACTORY WORKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04670**  
 Amount of Each Receipt this Period  
 25.00

**C. MS. REBECCA L. NOLTE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4103 S BURRELL ST.  
 City MILWAUKEE State WI Zip Code 53207-4405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer W.B. BOTTLE SUPPLY CO. Occupation FACTORY WORKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04671**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	345.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1662 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID M. NORBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 437 DORSET PLACE  
 City GLEN ELLYN State IL Zip Code 60137-5612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FLUID DYNAMICS Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04672**  
 Amount of Each Receipt this Period  
 150.00

**B. MR. DAVID M. NORBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 437 DORSET PLACE  
 City GLEN ELLYN State IL Zip Code 60137-5612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FLUID DYNAMICS Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04673**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. ROBERT NORDHUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 N. SMITH STREET #25  
 City CLARK State SD Zip Code 57225-1120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04674**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	320.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1663 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT NORDHUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 N. SMITH STREET #25  
 City CLARK State SD Zip Code 57225-1120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04675**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. LYNN NORDWICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 102  
 City POPLAR State MT Zip Code 59255-0102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04676**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. WENDELL NORMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6452 DALY ROAD  
 City CINCINNATI State OH Zip Code 45224-2124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04677**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 1664 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ROBERT G. NORRIS**

Mailing Address P.O. BOX 143

City State Zip Code  
HOLLY POND AL 35083-0143

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
JET PEP, INC. PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04678**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. MR. WILLIAM S. NORTENSEN**

Mailing Address 559 ALMOLOYA DRIVE

City State Zip Code  
PACIFIC PALISADES CA 90272-4426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
751.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04679**

Amount of Each Receipt this Period  
501.00

Full Name (Last, First, Middle Initial)  
**C. MR. WALTER G. NORTHCUTT**

Mailing Address 2640 N.W. 152ND STREET

City State Zip Code  
EDMOND OK 73013-8900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04680**

Amount of Each Receipt this Period  
221.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1222.00

**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 1665 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LARRY D. NORWOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11001 SWELFLING TERRACE  
 City AUSTIN State TX Zip Code 78737-3502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 541.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04681**  
 Amount of Each Receipt this Period  
 271.00

**B. MRS. MARY S. NORWOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 158  
 City HUMMELS WHARF State PA Zip Code 17831-0158  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04682**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. MARY S. NORWOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 158  
 City HUMMELS WHARF State PA Zip Code 17831-0158  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04683**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	471.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1666 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. MARY S. NORWOOD</b>		Date of Receipt MM / DD / YYYY 03 / 27 / 2014 <b>Transaction ID : 2014M04L11AI04684</b>
Mailing Address P. O. BOX 158		Amount of Each Receipt this Period 100.00
City HUMMELS WHARF	State PA	Zip Code 17831-0158
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. MR. GERALD H. NOSTRAND</b>		Date of Receipt MM / DD / YYYY 03 / 05 / 2014 <b>Transaction ID : 2014M04L11AI04685</b>
Mailing Address 1437 WYNKOOP DRIVE		Amount of Each Receipt this Period 2500.00
City COLORADO SPRINGS	State CO	Zip Code 80909-3245
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. PHEBE S. B. NOVAKOVIC</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2014 <b>Transaction ID : 2014M04L11AI04686</b>
Mailing Address 113 N. SPRING MILL ROAD		Amount of Each Receipt this Period 120.00
City VILLANOVA	State PA	Zip Code 19085-1514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2720.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1667 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PHEBE S. B. NOVAKOVIC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 113 N. SPRING MILL ROAD  
 City VILLANOVA State PA Zip Code 19085-1514  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04687**  
 Amount of Each Receipt this Period  
 75.00

**B. MR. FRANK E. NOVY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3320 N. TYLER ROAD  
 City WICHITA State KS Zip Code 67205-8724  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NAVY OIL & GAS, INC. Occupation MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04688**  
 Amount of Each Receipt this Period  
 101.00

**C. MRS. SARAH A. NOZNISKY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 54 HARDING AVENUE  
 City KENMORE State NY Zip Code 14217-1408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04689**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	426.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1668 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JANE K. NUGENT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 174 COUNTRY CLUB DRIVE  
 City State Zip Code  
 GROSSE POINTE FARMS MI 48236-2902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04690**  
 Amount of Each Receipt this Period  
 220.00

**B. MRS. PEGGY NUGENT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29 N. TRESURE ISLE  
 City State Zip Code  
 SLIDELL LA 70461-1109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04691**  
 Amount of Each Receipt this Period  
 200.00

**C. MRS. PEGGY NUGENT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29 N. TRESURE ISLE  
 City State Zip Code  
 SLIDELL LA 70461-1109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04692**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	540.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1669 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HOWARD A. NULL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7618 GEMWOOD STREET  
 City LAS VEGAS State NV Zip Code 89123-0566  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04693**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. HOWARD A. NULL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7618 GEMWOOD STREET  
 City LAS VEGAS State NV Zip Code 89123-0566  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04694**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. HOWARD A. NULL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7618 GEMWOOD STREET  
 City LAS VEGAS State NV Zip Code 89123-0566  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04695**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1670 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. CAPT. PAUL L. NUSCHKE U.S.N. (RE)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6932 AUGUSTA NATIONAL

City FAYETTEVILLE	State PA	Zip Code 17222-9410
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04696**

Amount of Each Receipt this Period  
 50.00

**B. CAPT. PAUL L. NUSCHKE U.S.N. (RE)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6932 AUGUSTA NATIONAL

City FAYETTEVILLE	State PA	Zip Code 17222-9410
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04697**

Amount of Each Receipt this Period  
 25.00

**C. CAPT. PAUL L. NUSCHKE U.S.N. (RE)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6932 AUGUSTA NATIONAL

City FAYETTEVILLE	State PA	Zip Code 17222-9410
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04698**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1671 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. BETTE NUSSBAUM**  
Full Name (Last, First, Middle Initial)

Mailing Address 7 SPRUCE DRIVE

City NEW CITY State NY Zip Code 10956-3705

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04699**

Amount of Each Receipt this Period  
 750.00

**B. MR. WAYNE &. NUSSBICKEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 3596 ROUTE 82

City MILLBROOK State NY Zip Code 12545-6033

FEC ID number of contributing federal political committee. **C**

Name of Employer N & S SUPPLY Occupation COMPANY PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04700**

Amount of Each Receipt this Period  
 500.00

**C. MR. GILBERT NUTT**  
Full Name (Last, First, Middle Initial)

Mailing Address 455 S. 4TH STREET SUITE 490

City LOUISVILLE State KY Zip Code 40202-2508

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04701**

Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1672 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ZOE DELL NUTTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 986 TREBEIN ROAD

City XENIA State OH Zip Code 45385-9534

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
03 / 06 / 2014  
Transaction ID : 2014M04L11AI04702

Amount of Each Receipt this Period  
1000.00

**B. GEN. FRANCIS NYE U.S.A.F.**  
Full Name (Last, First, Middle Initial)

Mailing Address 10500 ACADEMY ROAD NE  
APARTMENT 212

City ALBUQUERQUE State NM Zip Code 87111-7324

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 521.00

Date of Receipt  
03 / 24 / 2014  
Transaction ID : 2014M04L11AI04703

Amount of Each Receipt this Period  
101.00

**C. MR. GLENN P. O' BRIEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 13827 LEIGHFIELD STREET

City CHANTILLY State VA Zip Code 20151-2504

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
03 / 12 / 2014  
Transaction ID : 2014M04L11AI04704

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1673 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN W. O' DONNELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 AILEEN ROAD  
 City BRIELLE State NJ Zip Code 08730-1101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AIR CRUISERS COMPANY Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04705**  
 Amount of Each Receipt this Period 300.00

**B. MR. RAYMOND J. O' LEARY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1219 SAGE BRUSH STREET  
 City CODY State WY Zip Code 82414-8490  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04706**  
 Amount of Each Receipt this Period 100.00

**C. MRS. LOIS A. O' MALLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1709 N.W. 98TH STREET  
 City GAINESVILLE State FL Zip Code 32606-5515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04707**  
 Amount of Each Receipt this Period 350.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**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 1674 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KRISTAN O' NEILL**  
Full Name (Last, First, Middle Initial)

Mailing Address 2393 W. BARSTOW AVENUE

City FRESNO State CA Zip Code 93711-2805

FEC ID number of contributing federal political committee. **C**

Name of Employer WILDFLOWER DESIGNS, INC. Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04708**

Amount of Each Receipt this Period  
 250.00

**B. MR. LAWRENCE W. O' TOOLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 25 BLACK ROCK DRIVE

City HINGHAM State MA Zip Code 02043-4875

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04709**

Amount of Each Receipt this Period  
 1000.00

**C. MR. CECIL O'BRATE**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 399

City GARDEN CITY State KS Zip Code 67846-0399

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation BUSINESSMAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04710**

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00

**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 1675 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ELIZABETH R. O'BRIEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1620 MAYFLOWER COURT  
 APARTMENT A106  
 City WINTER PARK State FL Zip Code 32792-2573  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04711**  
 Amount of Each Receipt this Period  
 150.00

**B. REV. WILLIAM G. O'BRIEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 218 NEW BRAINTREE ROAD  
 City WEST BROOKFIELD State MA Zip Code 01585-3217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04712**  
 Amount of Each Receipt this Period  
 250.00

**C. REV. WILLIAM G. O'BRIEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 218 NEW BRAINTREE ROAD  
 City WEST BROOKFIELD State MA Zip Code 01585-3217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04713**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00  
**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 1676 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. GILBERT O'CONNELL</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI04714</b>
Mailing Address 1 SILVER FOX LANE		Amount of Each Receipt this Period 1500.00
City HILTON HEAD ISLAND	State SC	Zip Code 29926-1130
FEC ID number of contributing federal political committee. C		
Name of Employer NORWICH CORPORATION	Occupation REAL ESTATE EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>B. MS. KATHLEEN G. O'CONNOR</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI04715</b>
Mailing Address 970 AURORA AVENUE #C101		Amount of Each Receipt this Period 500.00
City BOULDER	State CO	Zip Code 80302-7276
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. MONA O'HIGGINS</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI04716</b>
Mailing Address 3512 PRESTIGE LANE		Amount of Each Receipt this Period 50.00
City BAKERSFIELD	State CA	Zip Code 93313-2615
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2050.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1677 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID C. O'LEARY**  
Full Name (Last, First, Middle Initial)

Mailing Address 1815 E. GREEN SPRINGS ROAD

City	State	Zip Code
LOUISA	VA	23093-4655

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
521.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2014

**Transaction ID : 2014M04L11AI04717**

Amount of Each Receipt this Period  
120.00

**B. MR. DAVID C. O'LEARY**  
Full Name (Last, First, Middle Initial)

Mailing Address 1815 E. GREEN SPRINGS ROAD

City	State	Zip Code
LOUISA	VA	23093-4655

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
521.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI04718**

Amount of Each Receipt this Period  
201.00

**C. MR. ANDREW P. O'MEARA JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 259 FAIRWAY LANE

City	State	Zip Code
PAWLEYS ISLAND	SC	29585-5611

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2014

**Transaction ID : 2014M04L11AI04719**

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	351.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1678 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ANDREW P. O'MEARA JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 259 FAIRWAY LANE  
 City PAWLEYS ISLAND State SC Zip Code 29585-5611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04720**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. JOHN J. O'NEIL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1534 STATE ROUTE 12  
 City BINGHAMTON State NY Zip Code 13901-5505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EARL MARKHAM Occupation BUILDING & GROWERS MAINTENANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 481.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04721**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. JOHN J. O'NEIL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1534 STATE ROUTE 12  
 City BINGHAMTON State NY Zip Code 13901-5505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EARL MARKHAM Occupation BUILDING & GROWERS MAINTENANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 481.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04722**  
 Amount of Each Receipt this Period  
 40.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	91.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1679 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. JOHN J. O'NEIL</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014 <b>Transaction ID : 2014M04L11AI04723</b>
Mailing Address 1534 STATE ROUTE 12		Amount of Each Receipt this Period 60.00
City BINGHAMTON	State NY	Zip Code 13901-5505
FEC ID number of contributing federal political committee. C		
Name of Employer EARL MARKHAM	Occupation BUILDING & GROWERS MAINTENANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 481.00	

Full Name (Last, First, Middle Initial) <b>B. MR. JOHN J. O'NEIL</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 21 / 2014 <b>Transaction ID : 2014M04L11AI04724</b>
Mailing Address 1534 STATE ROUTE 12		Amount of Each Receipt this Period 30.00
City BINGHAMTON	State NY	Zip Code 13901-5505
FEC ID number of contributing federal political committee. C		
Name of Employer EARL MARKHAM	Occupation BUILDING & GROWERS MAINTENANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 481.00	

Full Name (Last, First, Middle Initial) <b>C. MR. JOHN J. O'NEIL</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 21 / 2014 <b>Transaction ID : 2014M04L11AI04725</b>
Mailing Address 1534 STATE ROUTE 12		Amount of Each Receipt this Period 31.00
City BINGHAMTON	State NY	Zip Code 13901-5505
FEC ID number of contributing federal political committee. C		
Name of Employer EARL MARKHAM	Occupation BUILDING & GROWERS MAINTENANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 481.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	121.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1680 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. JOHN J. O'NEIL</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>27</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	03	/	27	/	2014
M M M	/	D D D	/	Y Y Y Y Y								
03	/	27	/	2014								
Mailing Address 1534 STATE ROUTE 12		<b>Transaction ID : 2014M04L11AI04726</b>										
City BINGHAMTON	State NY	Zip Code 13901-5505										
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 45.00											
Name of Employer EARL MARKHAM	Occupation BUILDING & GROWERS MAINTENANCE											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 481.00											

Full Name (Last, First, Middle Initial) <b>B. MR. HARVEY E. O'NEILL</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>28</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	03	/	28	/	2014
M M M	/	D D D	/	Y Y Y Y Y								
03	/	28	/	2014								
Mailing Address 143 FONTAINBLEAU DRIVE		<b>Transaction ID : 2014M04L11AI04727</b>										
City MANDEVILLE	State LA	Zip Code 70471-6434										
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1.00											
Name of Employer RETIRED	Occupation RETIRED											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00											

Full Name (Last, First, Middle Initial) <b>C. MR. HARVEY E. O'NEILL</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>31</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	03	/	31	/	2014
M M M	/	D D D	/	Y Y Y Y Y								
03	/	31	/	2014								
Mailing Address 143 FONTAINBLEAU DRIVE		<b>Transaction ID : 2014M04L11AI04728</b>										
City MANDEVILLE	State LA	Zip Code 70471-6434										
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00											
Name of Employer RETIRED	Occupation RETIRED											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00											

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	246.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1681 OF 2949
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN J. O'NEILL**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 397

City NEWARK State OH Zip Code 43058-0397

FEC ID number of contributing federal political committee. **C**

Name of Employer SOUTHGATE CORPORATION Occupation REAL ESTATE DEVELOPER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04729**

Amount of Each Receipt this Period  
 250.00

**B. MR. LAWRENCE H. O'NEILL**  
Full Name (Last, First, Middle Initial)

Mailing Address 14 KENSINGTON DRIVE

City RANDOLPH State NJ Zip Code 07869-3758

FEC ID number of contributing federal political committee. **C**

Name of Employer ALCATEL-LUCENT Occupation PHYSICIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 891.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04730**

Amount of Each Receipt this Period  
 891.00

**C. MRS. THELMA F. O'REILLY**  
Full Name (Last, First, Middle Initial)

Mailing Address 420 ELBROOK DRIVE  
APARTMENT 251

City FALLBROOK State CA Zip Code 92028-2728

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04731**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1191.00

**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 1682 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN M. O'ROURKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 GLENN AVENUE  
 City GLEN GARDNER State NJ Zip Code 08826-3627  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04732**  
 Amount of Each Receipt this Period 101.00

**B. DR. BETTY YOUNG O'DELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1111 MALLORCA DRIVE  
 City BRADENTON State FL Zip Code 34209-3331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04733**  
 Amount of Each Receipt this Period 100.00

**C. MRS. SUSAN K. OAKESON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1091 N. 3500 W.  
 City SLATERVILLE State UT Zip Code 84404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04734**  
 Amount of Each Receipt this Period 111.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 312.00  
**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 1683 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LAVERNE L. OAKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 231 SPEZIA DRIVE  
 City OXFORD State MI Zip Code 48371-4753  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 446.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04735**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. LAVERNE L. OAKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 231 SPEZIA DRIVE  
 City OXFORD State MI Zip Code 48371-4753  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 446.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04736**  
 Amount of Each Receipt this Period  
 35.00

**C. MR. LAVERNE L. OAKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 231 SPEZIA DRIVE  
 City OXFORD State MI Zip Code 48371-4753  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 446.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04737**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	310.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1684 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LAVERNE L. OAKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 231 SPEZIA DRIVE  
 City OXFORD State MI Zip Code 48371-4753  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 446.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04738**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. LAVERNE L. OAKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 231 SPEZIA DRIVE  
 City OXFORD State MI Zip Code 48371-4753  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 446.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04739**  
 Amount of Each Receipt this Period  
 35.00

**C. MR. BURNELL J. OATES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 806 JULLIARD COURT  
 City ORLANDO State FL Zip Code 32828-8672  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04740**  
 Amount of Each Receipt this Period  
 106.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 142.00  
**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 1685 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BER OBERFELD**  
Full Name (Last, First, Middle Initial)

Mailing Address 17 BEVERLY RIDGE TERRACE

City BEVERLY HILLS	State CA	Zip Code 90210-1343
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation INVESTOR
-----------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
545.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI04741**

Amount of Each Receipt this Period  
545.00

**B. MR. ROLAND OBERLIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 5404 HOLLY STREET

City BELLAIRE	State TX	Zip Code 77401-4704
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SOCIETE GENERALE	Occupation PETROELUM ENGINEER
--------------------------------------	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
896.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : 2014M04L11AI04742**

Amount of Each Receipt this Period  
451.00

**C. MRS. KAREN OERTEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 2308 BLOOMINGDALE ROAD

City CENTREVILLE	State MD	Zip Code 21617-1766
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FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
212.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2014

**Transaction ID : 2014M04L11AI04743**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1096.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1686 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KAREN OERTEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2308 BLOOMINGDALE ROAD  
 City CENTREVILLE State MD Zip Code 21617-1766  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 212.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04744**  
 Amount of Each Receipt this Period  
 62.00

**B. MR. DON OESTMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30498 COUNTY ROAD 50  
 City WRAY State CO Zip Code 80758-9512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04745**  
 Amount of Each Receipt this Period  
 125.00

**C. MR. DON OESTMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30498 COUNTY ROAD 50  
 City WRAY State CO Zip Code 80758-9512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04746**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	188.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1687 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. MAKOTO OGATA</b>		Date of Receipt 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI04747</b>
Mailing Address 9 MERIT PARK DRIVE		Amount of Each Receipt this Period 100.00
City GARDENA	State CA	Zip Code 90247-3839
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. MR. DAVID A. OGILVIE</b>		Date of Receipt 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI04748</b>
Mailing Address W8546 WHITETAIL TRAIL		Amount of Each Receipt this Period 1000.00
City HORTONVILLE	State WI	Zip Code 54944-9321
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. MS. CARMEN A. OGLE</b>		Date of Receipt 03 / 28 / 2014 <b>Transaction ID : 2014M04L11AI04749</b>
Mailing Address 7032 VIA CAMPANILE AVENUE		Amount of Each Receipt this Period 260.00
City LAS VEGAS	State NV	Zip Code 89131-0112
FEC ID number of contributing federal political committee. C		
Name of Employer CACUS CRACUS, INC.	Occupation CASINO SUPERVISOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1360.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1688 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD FRANK OGLETREE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3410 N. FORK HIGHWAY  
 City CODY State WY Zip Code 82414-7120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04750**  
 Amount of Each Receipt this Period  
 201.00

**B. MS. JEAN P. OGRADY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4205 KIMBRELEE COURT  
 City ALEXANDRIA State VA Zip Code 22309-3000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LIBRARY Occupation DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04751**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. MICHAEL WAYNE OGUIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 174 OVERLOOK DRIVE  
 City SUNNYVALE State TX Zip Code 75182-4608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OIL & GAS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04752**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	421.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1689 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL WAYNE OGUIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 174 OVERLOOK DRIVE  
 City SUNNYVALE State TX Zip Code 75182-4608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OIL & GAS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04753**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. MICHAEL WAYNE OGUIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 174 OVERLOOK DRIVE  
 City SUNNYVALE State TX Zip Code 75182-4608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OIL & GAS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04754**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. ANN AB OHREL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4709 PRAIRIE RIDGE DR.  
 City FT COLLINS State CO Zip Code 80526-3718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04755**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1690 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ANN AB OHREL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4709 PRAIRIE RIDGE DR.  
 City FT COLLINS State CO Zip Code 80526-3718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04756**  
 Amount of Each Receipt this Period  
 120.00

**B. MS. CAROL OJESKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1485 STALLION DRIVE  
 City FLORISSANT State MO Zip Code 63033-3131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04757**  
 Amount of Each Receipt this Period  
 250.00

**C. MS. CONSTANCE OKSOL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 247 4TH STREET APARTMENT 401  
 City OAKLAND State CA Zip Code 94607-4327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HAYWARD UNIFIED SCHOOL DISTRIC Occupation TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04758**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	570.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1691 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MISS JULIA OLAH**  
Full Name (Last, First, Middle Initial)

Mailing Address 110 44TH STREET

City SANDUSKY State OH Zip Code 44870-4856

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04759**

Amount of Each Receipt this Period  
 1.00

**B. MR. RICHARD R. OLANDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1742 N. FITZGERALD LANE

City HANFORD State CA Zip Code 93230-7901

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

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  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04760**

Amount of Each Receipt this Period  
 60.00

**C. MR. RICHARD R. OLANDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1742 N. FITZGERALD LANE

City HANFORD State CA Zip Code 93230-7901

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

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  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04761**

Amount of Each Receipt this Period  
 60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 121.00

**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 1692 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD R. OLANDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1742 N. FITZGERALD LANE  
 City HANFORD State CA Zip Code 93230-7901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04762**  
 Amount of Each Receipt this Period 80.00

**B. MRS. LUCY J. OLDFIELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3100 SHORE DRIVE APARTMENT 124  
 City VIRGINIA BEACH State VA Zip Code 23451-1159  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04763**  
 Amount of Each Receipt this Period 151.00

**C. MR. GEORGE OLEINIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 365 SUNSET DRIVE APARTMENT 1023  
 City DOUSMAN State WI Zip Code 53118-8843  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04764**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 481.00  
**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 1693 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ELIZABETH OLESON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 807 4TH STREET  
 City KALONA State IA Zip Code 52247-9484  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04765**  
 Amount of Each Receipt this Period  
 300.00

**B. DR. LARRY T. OLINDE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 500 FORSYTHE AVENUE  
 City MONROE State LA Zip Code 71201-4010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RENAL SERVICES OF N.E. LOUISIANA Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04766**  
 Amount of Each Receipt this Period  
 125.00

**C. MR. GREGORY S. OLIVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6509 CRESTPOINT DRIVE  
 City DALLAS State TX Zip Code 75254-8614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04767**  
 Amount of Each Receipt this Period  
 400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	825.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1694 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LEONARD EUGENE OLIVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 33 JEFFERSON COURT S.  
 City SAINT PETERSBURG State FL Zip Code 33711-5120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04768**  
 Amount of Each Receipt this Period  
 201.00

**B. MRS. SHIRLEY J. OLIVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1410 GRAND AVENUE  
 City GRAND ISLAND State NE Zip Code 68801-7412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TOWN & COUNTRY BANK Occupation BANKER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04769**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. JOSEPH A. OLIVERA JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1947  
 City SANTA MARIA State CA Zip Code 93456-1947  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04770**  
 Amount of Each Receipt this Period  
 245.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	946.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1695 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROGER D. OLLEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9121 N. BURR AVENUE  
 APARTMENT 225  
 City PORTLAND State OR Zip Code 97203-2467  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04771**  
 Amount of Each Receipt this Period  
 120.00

**B. MS. ELEANOR ELIZABETH OLSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2410 RODD STREET  
 City MIDLAND State MI Zip Code 48640-5474  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04772**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. GEORGE W. OLSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5206 W. 80TH TERRACE  
 City PRAIRIE VILLAGE State KS Zip Code 66208-4913  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04773**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	920.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1696 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. LAURENT M. OLSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2261 TUOLUMNE ST  
 APT 387  
 City VALLEJO State CA Zip Code 94589-3400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04774**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. LAWRENCE ANDREW OLSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 45 MCKENZIE COURT  
 City MILTON State WV Zip Code 25541-8617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04775**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. LAWRENCE ANDREW OLSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 45 MCKENZIE COURT  
 City MILTON State WV Zip Code 25541-8617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04776**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	501.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1697 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RANDY M. OLSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 3120 WOODBINE LANE

City JOHNSTOWN State CO Zip Code 80534-9138

FEC ID number of contributing federal political committee. **C**

Name of Employer CELRSTICA, INC. Occupation MATERIAL PROGRAM MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04777**

Amount of Each Receipt this Period  
 250.00

**B. MR. RICHARD OLSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2424 LANDINGS CIRCLE

City BRADENTON State FL Zip Code 34209-9772

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation NONE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04778**

Amount of Each Receipt this Period  
 1.00

**C. MR. RICHARD EDWIN OLSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 29648 DWAN DRIVE

City LAKE ELSINORE State CA Zip Code 92530-4751

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FINANCIAL ADVISOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04779**

Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 276.00

**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 1698 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD EDWIN OLSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29648 DWAN DRIVE  
 City LAKE ELSINORE State CA Zip Code 92530-4751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FINANCIAL ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04780**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. RICHARD EDWIN OLSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29648 DWAN DRIVE  
 City LAKE ELSINORE State CA Zip Code 92530-4751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FINANCIAL ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04781**  
 Amount of Each Receipt this Period  
 61.00

**C. MR. WILLARD OLSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17638 LYONS STREET NE  
 City COLUMBUS State MN Zip Code 55025-8854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04782**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 186.00  
**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 1699 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLARD OLSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 17638 LYONS STREET NE

City COLUMBUS State MN Zip Code 55025-8854

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **810.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04783**

Amount of Each Receipt this Period  
**100.00**

**B. MR. WILLIAM S. OLSON**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 93

City OSHKOSH State NE Zip Code 69154-0093

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04784**

Amount of Each Receipt this Period  
**120.00**

**C. MR. DAVID OMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 LOOKOUT AVENUE

City BRONXVILLE State NY Zip Code 10708-3001

FEC ID number of contributing federal political committee. **C**

Name of Employer BANK OF AMERICA Occupation BANKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1120.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04785**

Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1220.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1700 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM ONG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 721 SYLVAN AVENUE  
 City MOUNTAIN VIEW State CA Zip Code 94041-2510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04786**  
 Amount of Each Receipt this Period 500.00

**B. MR. STEVEN OPSAL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 402 INAGEHI CIRCLE  
 City LOUDON State TN Zip Code 37774-6842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04787**  
 Amount of Each Receipt this Period 750.00

**C. MR. FRANCISCO ORCHILLES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1650  
 City WINDERMERE State FL Zip Code 34786-1650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer J.F. MANAGEMENT GROUP Occupation PROPERTY MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04788**  
 Amount of Each Receipt this Period 201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1451.00  
**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 1701 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. VESELIN V. ORESHKOV**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5200 EAGLE RIDGE  
 City Springfield State IL Zip Code 62711-7812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04789**  
 Amount of Each Receipt this Period 500.00

**B. MR. KEITH E. ORMSBY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3120 RIVERBIRCH DRIVE APARTMENT 201  
 City Aurora State IL Zip Code 60502-7181  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CON AGRA FOODS Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04790**  
 Amount of Each Receipt this Period 100.00

**C. MR. JOSE OROZCO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1205 PEARL ST. SW  
 City Albuquerque State NM Zip Code 87121-7936  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REPUBLICAN NATIONAL COMMITTEE Occupation HISPANIC ENGAGEMENT DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04791**  
 Amount of Each Receipt this Period 350.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 950.00  
**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 1702 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM B. ORR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 MISTED LILAC PLACE  
 City SPRING State TX Zip Code 77381-6427  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04792**  
 Amount of Each Receipt this Period  
 315.00

**B. MRS. KAREN ORSAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 554  
 City BROADDUS State TX Zip Code 75929-0554  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OFFICE MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04793**  
 Amount of Each Receipt this Period  
 200.00

**C. MRS. KAREN ORSAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 554  
 City BROADDUS State TX Zip Code 75929-0554  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OFFICE MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04794**  
 Amount of Each Receipt this Period  
 201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	716.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1703 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD ORTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2121 DICKINSON ROAD  
 APARTMENT 9  
 City DE PERE State WI Zip Code 54115-1647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04795**  
 Amount of Each Receipt this Period  
 70.00

**B. MR. JOHN ORZECZOWSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 203 BECK FARM ROAD  
 City CENTREVILLE State MD Zip Code 21617-2115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 641.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04796**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. LOUIS M. ORZOLEK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3730 S. ONEIDA WAY  
 City DENVER State CO Zip Code 80237-1325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04797**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	271.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1704 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. KAREN R. OSAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 KELLOGG STREET  
 City State Zip Code  
 BROOKFIELD CT 06804-1527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI04798**  
 Amount of Each Receipt this Period  
 250.00

**B. MS. DANIELLE L. OSGOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 43 WOOD STREET  
 City State Zip Code  
 NASHUA NH 03064-1929  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04799**  
 Amount of Each Receipt this Period  
 250.00

**C. DR. STEVEN OSSAKOW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2676 CARRINGTON STREET N.W.  
 City State Zip Code  
 NORTH CANTON OH 44720-8159  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 OHIO HEAD & NECK SURGEONS, INC. MEDICAL DOCTOR  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04800**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1705 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PAUL C. OSTERGAARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2415 LOOKOUT MOUNTAIN ROAD  
 City FALLBROOK State CA Zip Code 92028-8374  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 521.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04801**  
 Amount of Each Receipt this Period  
 60.00

**B. MR. PAUL C. OSTERGAARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2415 LOOKOUT MOUNTAIN ROAD  
 City FALLBROOK State CA Zip Code 92028-8374  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 521.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04802**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. PAUL C. OSTERGAARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2415 LOOKOUT MOUNTAIN ROAD  
 City FALLBROOK State CA Zip Code 92028-8374  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 521.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04803**  
 Amount of Each Receipt this Period  
 36.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	216.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1706 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM OSTERMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8275 E. BELL ROAD #1196  
 City State Zip Code  
 SCOTTSDALE AZ 85260-1033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED MORTGAGE BROKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04804**  
 Amount of Each Receipt this Period  
 51.00

**B. PACY OSTROFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 772 N. MAIN STREET  
 City State Zip Code  
 GLEN ELLYN IL 60137-3942  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04805**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. RONALD OSTROVE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10925 IRIS CANYON LANE  
 City State Zip Code  
 LAS VEGAS NV 89135-1720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04806**  
 Amount of Each Receipt this Period  
 2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3051.00  
**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 1707 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD E. OTTO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12885 PARADISE DRIVE  
 City DEWITT State MI Zip Code 48820-7854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04807**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. ROBERT M. OTTO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 733 W. BENTON STREET  
 City IOWA CITY State IA Zip Code 52246-5903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JOHNSON COUNTY ATTORNEY'S OFFICE Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04808**  
 Amount of Each Receipt this Period  
 50.00

**C. MS. NANCY J. OUELLETTE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13391 PARKSIDE TERRACE  
 City COOPER CITY State FL Zip Code 33330-2646  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REALTOR  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04809**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00  
**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 1708 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT C. OVERALL SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 JOHN RINGLING BLVD.  
 APARTMENT T-1512  
 City SARASOTA State FL Zip Code 34236-1542  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04810**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. TOM H. OVERTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 821 FOX RUN DRIVE  
 APARTMENT 304  
 City RAPID CITY State SD Zip Code 57701-2376  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04811**  
 Amount of Each Receipt this Period  
 15.00

**C. MR. WILLIAM S. OVERTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8216 CEDAR CREST LANE  
 City SUFFOLK State VA Zip Code 23436-1204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer OVERTON'S MARKET, INC. Occupation MERCHANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04812**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 315.00  
**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 1709 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES A. OWEN**  
Full Name (Last, First, Middle Initial)

Mailing Address R.R.2. BOX 105

City AVA State MO Zip Code 65608-9603

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04813**

Amount of Each Receipt this Period  
 21.00

**B. MR. RANDY OWEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 553 RANDY OWEN DRIVE NE

City FORT PAYNE State AL Zip Code 35967-1000

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04814**

Amount of Each Receipt this Period  
 1000.00

**C. MR. GATHA A. OWENS**  
Full Name (Last, First, Middle Initial)

Mailing Address 4767 HARLEM WRENS ROAD

City HARLEM State GA Zip Code 30814-3432

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04815**

Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1122.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1710 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JEAN OWENS**

Mailing Address 13003 WATERFORD RUN DRIVE

City State Zip Code  
RIVERVIEW FL 33569-5730

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

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  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04816**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**B. LYLE OWENS**

Mailing Address 25542 EL PICADOR LANE

City State Zip Code  
MISSION VIEJO CA 92691-5433

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
INSURANCE PROFESSIONAL CONSULTING SERVICES

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04817**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MR. MICHAEL L. OWENS**

Mailing Address 1001 MELVIN ROAD

City State Zip Code  
ANNAPOLIS MD 21403-1334

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
DE WOLFF BOBERG & ASSOCIATES MANAGEMENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04818**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 470.00

**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 1711 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. MICHAEL L. OWENS**

Mailing Address 1001 MELVIN ROAD

City State Zip Code  
ANNAPOLIS MD 21403-1334

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
DE WOLFF BOBERG & ASSOCIATES MANAGEMENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04819**

Amount of Each Receipt this Period  
750.00

Full Name (Last, First, Middle Initial)  
**B. MR. RANDELL REECE OWENS**

Mailing Address 106 TUESDAY HAUS LANE

City State Zip Code  
LEWISVILLE TX 75077-6861

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED TRUCK DRIVER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04820**

Amount of Each Receipt this Period  
220.00

Full Name (Last, First, Middle Initial)  
**C. MRS. SANDRA OWENS**

Mailing Address 118 GRISTMILL ROAD N.E.

City State Zip Code  
HUNTSVILLE AL 35811-2535

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04821**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1270.00

**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 1712 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ASHLEY D. PACE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 615 BAYSHORE DRIVE  
 APARTMENT 1001  
 City PENSACOLA State FL Zip Code 32507-3571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 297.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04822**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. ASHLEY D. PACE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 615 BAYSHORE DRIVE  
 APARTMENT 1001  
 City PENSACOLA State FL Zip Code 32507-3571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 297.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04823**  
 Amount of Each Receipt this Period  
 21.00

**C. MR. J D D. PACE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7911 FISHBACK RD  
 City INDIANAPOLIS State IN Zip Code 46278-9718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer M J SCHUETZ AGENCY Occupation INSURANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04824**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	122.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1713 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. J D D. PACE**  
Full Name (Last, First, Middle Initial)

Mailing Address 7911 FISHBACK RD

City INDIANAPOLIS State IN Zip Code 46278-9718

FEC ID number of contributing federal political committee. **C**

Name of Employer M J SCHUETZ AGENCY Occupation INSURANCE

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  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04825**

Amount of Each Receipt this Period  
 200.00

**B. MR. DONALD H. PACKARD**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 3

City BRADLEY State IL Zip Code 60915-0003

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04826**

Amount of Each Receipt this Period  
 110.00

**C. MR. DONALD H. PACKARD**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 3

City BRADLEY State IL Zip Code 60915-0003

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04827**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	360.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1714 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DUANE PACKER**

Mailing Address 1118 SLIM WILLIAMS WAY

City State Zip Code  
JUNEAU AK 99801-8758

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04828**

Amount of Each Receipt this Period  
400.00

Full Name (Last, First, Middle Initial)  
**B. MR. THOMAS A. PACKER**

Mailing Address 2027 SHEPHERDIA DRIVE

City State Zip Code  
ANCHORAGE AK 99508-4043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
WEDBUSH MORGAN SECURITIES STOCKBROKER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04829**

Amount of Each Receipt this Period  
205.00

Full Name (Last, First, Middle Initial)  
**C. MRS. DIANNE BROADWAY PADGETT**

Mailing Address 10803 BURGOYNE ROAD

City State Zip Code  
HOUSTON TX 77042-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PADGETT EXPLORATION CONSULTING GEOPHYSICIST

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04830**

Amount of Each Receipt this Period  
100.00

**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: (check only one)	PAGE 1715 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DOUGLAS PADGETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 309

City JACKSONVILLE	State NC	Zip Code 28541-0309
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04831**

Amount of Each Receipt this Period  
 201.00

**B. MS. PATSY I. PAGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1155 MUIRLANDS VISTA WAY

City LA JOLLA	State CA	Zip Code 92037-6210
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04832**

Amount of Each Receipt this Period  
 250.00

**C. MRS. TWANDA MARIE PAGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10064 DEER CREEK ROAD

City WEATHERFORD	State OK	Zip Code 73096-7202
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04833**

Amount of Each Receipt this Period  
 90.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	541.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1716 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. DR. PAUL PAGEL**

Mailing Address 312 EDINBORO ROAD

City State Zip Code  
STATEN ISLAND NY 10306-1254

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04834**

Amount of Each Receipt this Period  
135.00

Full Name (Last, First, Middle Initial)  
**B. MISS CATHERINE A. PAINTER**

Mailing Address 109 BEVERLY ROAD

City State Zip Code  
ASHLAND VA 23005-1803

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
289.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04835**

Amount of Each Receipt this Period  
104.00

Full Name (Last, First, Middle Initial)  
**C. MS. JULIANNE PAINTER**

Mailing Address P.O. BOX 541

City State Zip Code  
CARMEL VALLEY CA 93924-0541

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04836**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	339.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1717 OF 2949		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JULIANNE PAINTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 541  
 City CARMEL VALLEY State CA Zip Code 93924-0541  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **350.00**

Date of Receipt: **03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI04837**  
 Amount of Each Receipt this Period: **50.00**

**B. DR. MARK PAKAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 184-21 AVON ROAD  
 City JAMAICA State NY Zip Code 11432-5820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **SELF-EMPLOYED** Occupation: **DENTIST**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1025.00**

Date of Receipt: **03 / 12 / 2014**  
**Transaction ID : 2014M04L11AI04838**  
 Amount of Each Receipt this Period: **750.00**

**C. DR. DONNA PALACIOS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1623 GARLAND DRIVE  
 City GOSHEN State IN Zip Code 46526-5604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **330.00**

Date of Receipt: **03 / 21 / 2014**  
**Transaction ID : 2014M04L11AI04839**  
 Amount of Each Receipt this Period: **220.00**

**SUBTOTAL** of Receipts This Page (optional)..... **1020.00**  
**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 1718 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HENRIK S. PALME**  
Full Name (Last, First, Middle Initial)

Mailing Address 10830 IOTA DRIVE

City SAN ANTONIO State TX Zip Code 78217-2606

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04840**

Amount of Each Receipt this Period  
 300.00

**B. MR. JACK A. PALMER**  
Full Name (Last, First, Middle Initial)

Mailing Address 26350 WOODLYN DRIVE

City BONITA SPRINGS State FL Zip Code 34134-5632

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04841**

Amount of Each Receipt this Period  
 250.00

**C. MR. JACK A. PALMER**  
Full Name (Last, First, Middle Initial)

Mailing Address 26350 WOODLYN DRIVE

City BONITA SPRINGS State FL Zip Code 34134-5632

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04842**

Amount of Each Receipt this Period  
 1001.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1551.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1719 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JUDITH F. PALMER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2731 OCEAN DRIVE

City VERO BEACH State FL Zip Code 32963-2059

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04843**

Amount of Each Receipt this Period  
 50.00

**B. MRS. JUDITH F. PALMER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2731 OCEAN DRIVE

City VERO BEACH State FL Zip Code 32963-2059

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04844**

Amount of Each Receipt this Period  
 50.00

**C. MR. CHARLES A. PALMGREN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1933 HANOVER LANE

City FLOSSMOOR State IL Zip Code 60422-1925

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04845**

Amount of Each Receipt this Period  
 115.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 215.00

**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 1720 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES A. PALMGREN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1933 HANOVER LANE  
 City FLOSSMOOR State IL Zip Code 60422-1925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04846**  
 Amount of Each Receipt this Period  
 115.00

**B. MR. CHARLES G. PANACEK JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1190 ENTERPRISE OSTEEN ROAD  
 City ENTERPRISE State FL Zip Code 32725-9357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 551.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04847**  
 Amount of Each Receipt this Period  
 550.00

**C. MR. CHARLES G. PANACEK JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1190 ENTERPRISE OSTEEN ROAD  
 City ENTERPRISE State FL Zip Code 32725-9357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 551.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04848**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	666.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1721 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. ROSS PANGERE**

Mailing Address 5901 CARLSON AVE

City PORTAGE State IN Zip Code 46368-1309

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation CONTRACTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04849**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MRS. ELIZABETH PANKEY**

Mailing Address P.O. BOX 10274

City SANTA ANA State CA Zip Code 92711-0274

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04850**

Amount of Each Receipt this Period  
400.00

Full Name (Last, First, Middle Initial)  
**C. MR. GREGORY PANOPOULOS**

Mailing Address 7 E. 14TH STREET  
APARTMENT 1405

City NEW YORK State NY Zip Code 10003-3124

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04851**

Amount of Each Receipt this Period  
121.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 771.00

**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 1722 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GREGORY J. PANZO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2037 CROOKED LAKE ESTATES LANE  
 City EUSTIS State FL Zip Code 32726-5721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MID FLORIDA EYE CENTER Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04852**  
 Amount of Each Receipt this Period  
 220.00

**B. JONATHAN PARDEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 540 BELLEVUE AVENUE  
 City NEWPORT State RI Zip Code 02840-4118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JONATHAN PARDEE Occupation MARKETING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04853**  
 Amount of Each Receipt this Period  
 50.00

**C. JONATHAN PARDEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 540 BELLEVUE AVENUE  
 City NEWPORT State RI Zip Code 02840-4118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JONATHAN PARDEE Occupation MARKETING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04854**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1723 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. JONATHAN PARDEE**  
Full Name (Last, First, Middle Initial)

Mailing Address 540 BELLEVUE AVENUE

City NEWPORT State RI Zip Code 02840-4118

FEC ID number of contributing federal political committee. **C**

Name of Employer JONATHAN PARDEE Occupation MARKETING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04855**

Amount of Each Receipt this Period  
 100.00

**B. JONATHAN PARDEE**  
Full Name (Last, First, Middle Initial)

Mailing Address 540 BELLEVUE AVENUE

City NEWPORT State RI Zip Code 02840-4118

FEC ID number of contributing federal political committee. **C**

Name of Employer JONATHAN PARDEE Occupation MARKETING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04856**

Amount of Each Receipt this Period  
 100.00

**C. MR. GERALD G. PARDINI**  
Full Name (Last, First, Middle Initial)

Mailing Address 8901 TEMPEST CIRCLE

City ANCHORAGE State AK Zip Code 99507-3970

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04857**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1724 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. RAQUEL C. PAREDES</b>		Date of Receipt
Mailing Address 100 ARDEN STREET APARTMENT 6E		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City NEW YORK	State NY	Zip Code 10040-1508
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI04858</b>
Name of Employer RETIRED	Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="200.00"/>
	<input type="text" value="370.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MS. RAQUEL C. PAREDES</b>		Date of Receipt
Mailing Address 100 ARDEN STREET APARTMENT 6E		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City NEW YORK	State NY	Zip Code 10040-1508
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI04859</b>
Name of Employer RETIRED	Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
	<input type="text" value="370.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MS. RAQUEL C. PAREDES</b>		Date of Receipt
Mailing Address 100 ARDEN STREET APARTMENT 6E		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City NEW YORK	State NY	Zip Code 10040-1508
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI04860</b>
Name of Employer RETIRED	Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="120.00"/>
	<input type="text" value="370.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="370.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1725 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JOHN PARENTE**

Mailing Address 478 SCHOOLHOUSE ROAD

City State Zip Code  
TUNKHANNOCK PA 18657-5907

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04861**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. DR. HAVNER H. PARISH JR.**

Mailing Address 107 OWENS LANE

City State Zip Code  
SOUTHERN PINES NC 28387-2240

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04862**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MR. JOHN T. PARISH JR.**

Mailing Address 4112 S. AVENUE 5 1/2 E.

City State Zip Code  
YUMA AZ 85365-6700

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
901.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04863**

Amount of Each Receipt this Period  
1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 551.00

**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 1726 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD L. PARISH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 LAKESHORE DRIVE #L7  
 City NORTH PALM BEACH State FL Zip Code 33408-3660  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04864**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. ROY H. PARK JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 HAMPTON HILL LANE  
 City ITHACA State NY Zip Code 14850-1081  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PARK OUTDOOR ADVERTISING Occupation ADVERTISING MEDIA EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04865**  
 Amount of Each Receipt this Period  
 126.00

**C. MR. CRAIG STEPHEN PARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 419 1/2 STANDARD STREET  
 City EL SEGUNDO State CA Zip Code 90245-3038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ELECTRICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04866**  
 Amount of Each Receipt this Period  
 220.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	846.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1727 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID E. PARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 159  
 City NEWTON GROVE State NC Zip Code 28366-0159  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PARKER GAS COMPANY, INC. Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04867**  
 Amount of Each Receipt this Period  
 400.00

**B. MR. DAVID P. PARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 67 CARRIAGE WAY  
 City SUDBURY State MA Zip Code 01776-2840  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04868**  
 Amount of Each Receipt this Period  
 100.00

**C. DR. JAMES A. PARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6029 WESTMINSTER LANE  
 City SAN ANGELO State TX Zip Code 76901-5331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SHANNON CLINIC Occupation PHYSICIAN  
 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  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04869**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1728 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. CWO JOHN BARRY PARKER JR. U.S.A.**

Mailing Address 4812 NW 57TH BLVD.

City State Zip Code  
JENNINGS FL 32053-2657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
341.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04870**

Amount of Each Receipt this Period  
60.00

Full Name (Last, First, Middle Initial)  
**B. CWO JOHN BARRY PARKER JR. U.S.A.**

Mailing Address 4812 NW 57TH BLVD.

City State Zip Code  
JENNINGS FL 32053-2657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
341.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04871**

Amount of Each Receipt this Period  
60.00

Full Name (Last, First, Middle Initial)  
**C. CWO JOHN BARRY PARKER JR. U.S.A.**

Mailing Address 4812 NW 57TH BLVD.

City State Zip Code  
JENNINGS FL 32053-2657

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
341.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04872**

Amount of Each Receipt this Period  
61.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 181.00

**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 1729 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PATRICIA PARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2101 LOS RIOS BLVD.  
 City PLANO State TX Zip Code 75074-3815  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04873**  
 Amount of Each Receipt this Period  
 120.00

**B. MRS. PEGGY A. PARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1941 COUNTY HIGHWAY 2  
 City GEFF State IL Zip Code 62842-1050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04874**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. PEGGY A. PARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1941 COUNTY HIGHWAY 2  
 City GEFF State IL Zip Code 62842-1050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04875**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 220.00  
**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 1730 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PEGGY A. PARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1941 COUNTY HIGHWAY 2  
 City State Zip Code  
 GEFF IL 62842-1050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04876**  
 Amount of Each Receipt this Period  
 76.00

**B. MR. W. A. PARKER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4401 NORTHSIDE PARKEAY N.W.  
 SUITE 290  
 City State Zip Code  
 ATLANTA GA 30327-5209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 COMANCHE INVESTMENT COMPANY, L.L.C. CHAIRMAN  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04877**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. MICHAEL W. PARKINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26078 N. 115TH WAY  
 City State Zip Code  
 SCOTTSDALE AZ 85255-5781  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED SALES  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04878**  
 Amount of Each Receipt this Period  
 350.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 676.00  
**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 1731 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JOHN S. PARMERLEE**

Mailing Address 718 W. 111TH TERRACE

City State Zip Code  
KANSAS CITY MO 64114-5107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04879**

Amount of Each Receipt this Period  
101.00

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT B. PARRIOTT**

Mailing Address 16160 RIDGEWOOD DRIVE

City State Zip Code  
SONORA CA 95370-8753

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
TWIN HARTE MARKET GROCER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04880**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MRS. MARY PARSEGHIAN**

Mailing Address 1414 MARION DRIVE

City State Zip Code  
GLENDALE CA 91205-3719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04881**

Amount of Each Receipt this Period  
102.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 303.00

**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 1732 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES R. PARSONS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 104 RICHARD RD  
 City SYRACUSE State NY Zip Code 13215-1530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04882**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. JACK PASINI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4280 GALT OCEAN DRIVE 11P  
 City FT LAUDERDALE State FL Zip Code 33308-6147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04883**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. JACK PASINI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4280 GALT OCEAN DRIVE 11P  
 City FT LAUDERDALE State FL Zip Code 33308-6147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04884**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 950.00  
**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 1733 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JACK PASINI**  
Full Name (Last, First, Middle Initial)

Mailing Address 4280 GALT OCEAN DRIVE  
11P

City FT LAUDERDALE State FL Zip Code 33308-6147

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
950.00

Date of Receipt  
03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04885**

Amount of Each Receipt this Period  
250.00

**B. MR. THOMAS PASSIOS**  
Full Name (Last, First, Middle Initial)

Mailing Address 44 CEDAR CLIFF ROAD

City RIVERSIDE State CT Zip Code 06878-2604

FEC ID number of contributing federal political committee. **C**

Name of Employer PINNACLE ASSOCIATES, LTD. Occupation INVESTMENT MANAGEMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04886**

Amount of Each Receipt this Period  
1500.00

**C. MR. ROBERT F. PASTERIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2707 NORTHMOOR DRIVE

City NAPERVILLE State IL Zip Code 60564-6027

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04887**

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1734 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. LUANNE PATAK**

Mailing Address 19885 STATE STREET

City BENNINGTON      State NE      Zip Code 68007-4802

FEC ID number of contributing federal political committee. **C**

Name of Employer MARKEL INSURANCE COMPANY      Occupation DIRECTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI04888**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**B. MR. YINGYOT JIM PATANASON**

Mailing Address 7235BAIRD AVE.

City RESEDA      State CA      Zip Code 91335-3069

FEC ID number of contributing federal political committee. **C**

Name of Employer CEDARS SINAI MEDICAL CENTER      Occupation INVENTORY CONTROL SPECIALIST

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  
**03 / 06 / 2014**  
**Transaction ID : 2014M04L11AI04889**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**C. MRS. PANNA PATEL**

Mailing Address 103 GRAYLYN DRIVE

City CHAPEL HILL      State NC      Zip Code 27516-4456

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER      Occupation HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 13 / 2014**  
**Transaction ID : 2014M04L11AI04890**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **400.00**

**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 1735 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. EDWIN L. PATMORE**  
Full Name (Last, First, Middle Initial)

Mailing Address 122 ALLEGHENY RIDGE LANE

City BERRYVILLE State VA Zip Code 22611-1804

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 383.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI04891**

Amount of Each Receipt this Period  
 50.00

**B. DR. EDWIN L. PATMORE**  
Full Name (Last, First, Middle Initial)

Mailing Address 122 ALLEGHENY RIDGE LANE

City BERRYVILLE State VA Zip Code 22611-1804

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 383.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04892**

Amount of Each Receipt this Period  
 50.00

**C. DR. EDWIN L. PATMORE**  
Full Name (Last, First, Middle Initial)

Mailing Address 122 ALLEGHENY RIDGE LANE

City BERRYVILLE State VA Zip Code 22611-1804

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 383.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04893**

Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 135.00

**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 1736 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. EDWIN L. PATMORE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 122 ALLEGHENY RIDGE LANE  
 City State Zip Code  
 BERRYVILLE VA 22611-1804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 383.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04894**  
 Amount of Each Receipt this Period  
 3.00

**B. MR. JOHN W. PATRIZI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 875  
 City State Zip Code  
 PEOTONE IL 60468-0875  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 J. & L. ELECTRONIC SERVICE, INC. ELECTRONIC ENGINEER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04895**  
 Amount of Each Receipt this Period  
 85.00

**C. MR. JOHN W. PATRIZI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 875  
 City State Zip Code  
 PEOTONE IL 60468-0875  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 J. & L. ELECTRONIC SERVICE, INC. ELECTRONIC ENGINEER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04896**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 208.00  
**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 1737 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID PATTEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 315 LANSDOWNE RD  
 City State Zip Code  
 HAVERTOWN PA 19083-5305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 EVERCHEM SPECIALTY CHEMICALS GENERAL MANAGER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04897**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. MAURICE M. PATTERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1524 N. PURNELL STREET  
 City State Zip Code  
 WHEATON IL 60187-3483  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04898**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. MAURICE M. PATTERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1524 N. PURNELL STREET  
 City State Zip Code  
 WHEATON IL 60187-3483  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04899**  
 Amount of Each Receipt this Period  
 41.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	591.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1738 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SOLON P. PATTERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2660 PEACHTREE ROAD N.W.  
 UNIT 22E  
 City ATLANTA State GA Zip Code 30305-3678  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04900**  
 Amount of Each Receipt this Period  
 5000.00

**B. MR. WRENN MARSHALL PATTERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 222 WINDING RIDGE DRIVE  
 City CARY State NC Zip Code 27518-8934  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N.C. DEPARTMENT OF PUBLIC SAFETY Occupation NETWORK SECURITY MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04901**  
 Amount of Each Receipt this Period  
 251.00

**C. MR. JAMES L. PATTILLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1143 GLENVIEW ROAD  
 City SANTA BARBARA State CA Zip Code 93108-2001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04902**  
 Amount of Each Receipt this Period  
 301.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5552.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1739 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. DR. ROBERT C. PATTON**

Mailing Address 1936 LAMONT STREET

City Kingsport      State TN      Zip Code 37664-2020

FEC ID number of contributing federal political committee. **C**

Name of Employer VETERAN ADMINISTRATION      Occupation PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04903**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**B. MRS. THOMASINA B. PATTON**

Mailing Address P.O. BOX 239

City Avon Lake      State OH      Zip Code 44012-0239

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED      Occupation REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04904**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. MANVIR S. PAWAR**

Mailing Address 3673 VISTA CHARONOAKS

City Walnut Creek      State CA      Zip Code 94598-4050

FEC ID number of contributing federal political committee. **C**

Name of Employer PAWAR TRANSPORTATION, LLC      Occupation OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04905**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 620.00

**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 1740 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARIAN PHELPS PAWLICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 522  
 City LAKE BLUFF State IL Zip Code 60044-0522  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04906**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. LISLE W. PAYNE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3616 JACKSON STREET  
 City SAN FRANCISCO State CA Zip Code 94118-1810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04907**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. RONALD L. PAYNE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2146 SHARON LANE  
 City CHARLOTTE State NC Zip Code 28211-3736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04908**  
 Amount of Each Receipt this Period  
 225.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 595.00  
**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 1741 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DANIEL R. PEARSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22168 TIMBERLAND COURT  
 City SAINT AUGUSTA State MN Zip Code 55320-4558  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PLEASURELAND R.V. Occupation PRESIDENT/C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04909**  
 Amount of Each Receipt this Period  
 101.00

**B. MR. ROCKY PEARSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 10241  
 City MIDLAND State TX Zip Code 79702-7241  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LANDMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04910**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. ROCKY PEARSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 10241  
 City MIDLAND State TX Zip Code 79702-7241  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LANDMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04911**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	351.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1742 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROCKY PEARSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 10241  
 City MIDLAND State TX Zip Code 79702-7241  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LANDMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04912**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. DAVID FRANCIS PECK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5204 NORMANDY DRIVE  
 City COLLEYVILLE State TX Zip Code 76034-5564  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04913**  
 Amount of Each Receipt this Period  
 750.00

**C. MRS. ANN F. PECKHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5975 WOODCREEK LANE  
 City MIDDLETON State WI Zip Code 53562-1974  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04914**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 852.00  
**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 1743 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID D. PEDEN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2156 AVALON PLACE  
 City HOUSTON State TX Zip Code 77019-6406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PORTER HEDGES LLP Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04915**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. WILLIAM S. PEDEN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 521 MC KELVEY ROAD  
 City PELZER State SC Zip Code 29669-9647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04916**  
 Amount of Each Receipt this Period  
 120.00

**C. MRS. EVELYN ANNE PEEBLES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 54 HONEY DRIVE  
 City VICTORIA State TX Zip Code 77904-5203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 437.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04917**  
 Amount of Each Receipt this Period  
 75.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	695.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1744 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. EVELYN ANNE PEEBLES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 54 HONEY DRIVE  
 City VICTORIA State TX Zip Code 77904-5203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 437.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI04918**  
 Amount of Each Receipt this Period  
 30.00

**B. MRS. EVELYN ANNE PEEBLES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 54 HONEY DRIVE  
 City VICTORIA State TX Zip Code 77904-5203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 437.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04919**  
 Amount of Each Receipt this Period  
 87.00

**C. MR. DAVID PEEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 42 TAMARADE DRIVE  
 City LITTLETON State CO Zip Code 80127-3515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PALLADIO PROPERTIES LLC Occupation PROPERTY MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04920**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 217.00  
**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 1745 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. DAVID PEEL</b>		Date of Receipt
Mailing Address 42 TAMARADE DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 19 / 2014
City	State	Zip Code
LITTLETON	CO	80127-3515
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI04921
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		100.00
Name of Employer	Occupation	
PALLADIO PROPERTIES LLC	PROPERTY MANAGER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	201.00	

Full Name (Last, First, Middle Initial) <b>B. MR. DAVID PEEL</b>		Date of Receipt
Mailing Address 42 TAMARADE DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 25 / 2014
City	State	Zip Code
LITTLETON	CO	80127-3515
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI04922
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		1.00
Name of Employer	Occupation	
PALLADIO PROPERTIES LLC	PROPERTY MANAGER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	201.00	

Full Name (Last, First, Middle Initial) <b>C. MR. LARRY C. PEEL</b>		Date of Receipt
Mailing Address 31406 HELEN LANE		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014
City	State	Zip Code
TOMBALL	TX	77375-2979
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI04923
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		200.00
Name of Employer	Occupation	
SELF-EMPLOYED	CONSULTANT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	301.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1746 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ELIZABETH PEEPLES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address SYLVAN ISLAND ROAD #5  
 City SAVANNAH State GA Zip Code 31404-5028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt: **03 / 27 / 2014**  
**Transaction ID : 2014M04L11AI04924**  
 Amount of Each Receipt this Period: **250.00**

**B. MR. WALTER PEIRSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11804 LAKE HOUSE COURT  
 City NORTH PALM BEACH State FL Zip Code 33408-3322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **605.00**

Date of Receipt: **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI04925**  
 Amount of Each Receipt this Period: **605.00**

**C. MR. ALBERT A. PELLEGRINI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 173 BERRYHILL COURT  
 City WEST HEMPSTEAD State NY Zip Code 11552-1503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **SELF-EMPLOYED** Occupation: **BUTCHER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt: **03 / 07 / 2014**  
**Transaction ID : 2014M04L11AI04926**  
 Amount of Each Receipt this Period: **125.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>980.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1747 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. AMALIA L. PELLON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 76 VETERANS AVENUE  
 City BATH State NY Zip Code 14810-0810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04927**  
 Amount of Each Receipt this Period  
 50.00

**B. MS. AMALIA L. PELLON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 76 VETERANS AVENUE  
 City BATH State NY Zip Code 14810-0810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI04928**  
 Amount of Each Receipt this Period  
 130.00

**C. MR. BENNIE PENA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3200 GREYSTONE COURT S.E.  
 City RIO RANCHO State NM Zip Code 87124-1261  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04929**  
 Amount of Each Receipt this Period  
 2.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	182.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1748 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. LESLIE PENKHUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 755 EL POMAR ROAD  
 UNIT 631  
 City COLORADO SPRINGS State CO Zip Code 80906-4264  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI04930**  
 Amount of Each Receipt this Period  
 500.00  
 Aggregate Year-to-Date ▼  
 500.00

**B. DR. ROBERT A. PENN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4116 CONNOR COURT  
 City WILMINGTON State NC Zip Code 28412-7508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NEW HANOVER REGIONAL MEDICAL CENTER Occupation PHYSICIAN  
 Receipt For:  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04931**  
 Amount of Each Receipt this Period  
 250.00  
 Aggregate Year-to-Date ▼  
 250.00

**C. SGT. MAJ. STANLEY R. PENN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 VIOLA LANE  
 City HOLTSVILLE State NY Zip Code 11742-1025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OWNER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04932**  
 Amount of Each Receipt this Period  
 20.00  
 Aggregate Year-to-Date ▼  
 706.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 770.00  
**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 1749 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. SGT. MAJ. STANLEY R. PENN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 VIOLA LANE  
 City State Zip Code  
 HOLTSVILLE NY 11742-1025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED OWNER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 706.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04933**  
 Amount of Each Receipt this Period  
 21.00

**B. MS. IVA M. PENNELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6480 15TH STREET N.E.  
 City State Zip Code  
 EAST CANTON OH 44730-1808  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04934**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. DONALD J. PENNIALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1413 8TH STREET  
 City State Zip Code  
 CORONADO CA 92118-2202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04935**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 391.00  
**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 1750 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LAWRENCE PENNINGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 656 COUNTY ROAD 1127  
 City State Zip Code  
 DAINGERFIELD TX 75638-3026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04936**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. LAWRENCE PENNINGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 656 COUNTY ROAD 1127  
 City State Zip Code  
 DAINGERFIELD TX 75638-3026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04937**  
 Amount of Each Receipt this Period  
 75.00

**C. MR. LAWRENCE PENNINGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 656 COUNTY ROAD 1127  
 City State Zip Code  
 DAINGERFIELD TX 75638-3026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04938**  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 475.00  
**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 1751 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. PAULA L. PEPPARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11936 TAVEL CIRCLE  
 City DALLAS State TX Zip Code 75230-2232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 770.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04939**  
 Amount of Each Receipt this Period 385.00

**B. DR. DENNIS PEPPAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 134 STONEWALL BEND  
 City SAN ANTONIO State TX Zip Code 78256-1637  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.T.H.S.C.S.A. Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04940**  
 Amount of Each Receipt this Period 750.00

**C. MR. GLENN D. PEPPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19160 JOSLIN CIRCLE  
 City BIG RAPIDS State MI Zip Code 49307-8772  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 217.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04941**  
 Amount of Each Receipt this Period 106.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1241.00  
**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 1752 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GLENN D. PEPPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19160 JOSLIN CIRCLE  
 City State Zip Code  
 BIG RAPIDS MI 49307-8772  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED ACCOUNTANT  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 217.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04942**  
 Amount of Each Receipt this Period  
 111.00

**B. MS. MARY PEPPIATT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 106 RAVEN ROCK ROAD  
 City State Zip Code  
 HENRICO VA 23229-7821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04943**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. CLAUDE D. PERASSO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1960 BROADWAY  
 City State Zip Code  
 SAN FRANCISCO CA 94109-2216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04944**  
 Amount of Each Receipt this Period  
 201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	562.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1753 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SCOTT MICHAEL PERETH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1621 CLOVER LANE  
 City FORT WORTH State TX Zip Code 76107-3902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VINCORP LLC Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04945**  
 Amount of Each Receipt this Period 251.00

**B. MR. MILES S. PERKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 195 LANE 275B TURKEY LAKE  
 City HUDSON State IN Zip Code 46747-9208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04946**  
 Amount of Each Receipt this Period 500.00

**C. MR. ROBERT D. PERLICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1405 WOODLAWN CIRCLE  
 City ELM GROVE State WI Zip Code 53122-1644  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04947**  
 Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1751.00  
**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 1754 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ROSE PERRA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 898 LARSON DRIVE  
 City ZUMBROTA State MN Zip Code 55992-1158  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04948**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. CHARLES F. PERRELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26300 SILENT HILLS LANE  
 City LOS ALTOS HILLS State CA Zip Code 94022-4479  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 12000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04949**  
 Amount of Each Receipt this Period  
 10000.00

**C. MR. JACK L. PERRIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 500 EASTGATE LANE  
 City SANTA BARBARA State CA Zip Code 93108-2248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04950**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10251.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1755 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. BUD PERRY**

Mailing Address 8102 WHITFORD COURT

City State Zip Code  
WINDERMERE FL 34786-5617

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
OAKLEY CORPORATION CHAIRMAN OF THE BOARD

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04951**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. MR. HENRY V. PERRY**

Mailing Address 3840 CAMELLIA DRIVE

City State Zip Code  
WEST POINT VA 23181-9357

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04952**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MR. HENRY V. PERRY**

Mailing Address 3840 CAMELLIA DRIVE

City State Zip Code  
WEST POINT VA 23181-9357

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04953**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1150.00

**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 1756 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JOANNE S. PERRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 WOODRIDGE DRIVE  
 City ORMOND BEACH State FL Zip Code 32174-4601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 685.00

Date of Receipt  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04954**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. JOANNE S. PERRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 WOODRIDGE DRIVE  
 City ORMOND BEACH State FL Zip Code 32174-4601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 685.00

Date of Receipt  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04955**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. JOANNE S. PERRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 WOODRIDGE DRIVE  
 City ORMOND BEACH State FL Zip Code 32174-4601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 685.00

Date of Receipt  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04956**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1757 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JOANNE S. PERRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 WOODRIDGE DRIVE  
 City ORMOND BEACH State FL Zip Code 32174-4601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 685.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04957**  
 Amount of Each Receipt this Period 50.00

**B. MS. LYNN L. PESECKIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2700 N. OCEAN DRIVE APARTMENT 502A  
 City RIVIERA BEACH State FL Zip Code 33404-4750  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04958**  
 Amount of Each Receipt this Period 250.00

**C. MR. RONALD PETERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 115 DEERFIELD LANE  
 City ONEONTA State NY Zip Code 13820-4689  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04959**  
 Amount of Each Receipt this Period 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 301.00  
**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 1758 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ALICE J. PETERSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1026 CLUBHOUSE COURT  
 City State Zip Code  
 DELL RAPIDS SD 57022-5357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04960**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. TOM H. PETERSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8030 PEBBLE CREEK LANE W.  
 City State Zip Code  
 PONTE VEDRA BEACH FL 32082-3102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED CONSULTANT  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04961**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. W. HAROLD PETERSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23929 VALENCIA BLVD.  
 SUITE 215  
 City State Zip Code  
 VALENCIA CA 91355-5309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PETERSEN INTERNATIONAL UNDERWRITER INSURANCE EXECUTIVE  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI04962**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1759 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID PETERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 10720 MISSISSIPPI BLVD. N.W.

City MINNEAPOLIS	State MN	Zip Code 55433-3862
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
286.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2014

**Transaction ID : 2014M04L11AI04963**

Amount of Each Receipt this Period  
95.00

**B. MR. DAVID PETERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 10720 MISSISSIPPI BLVD. N.W.

City MINNEAPOLIS	State MN	Zip Code 55433-3862
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
286.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2014

**Transaction ID : 2014M04L11AI04964**

Amount of Each Receipt this Period  
96.00

**C. MR. JOHN H. PETERSON JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 578

City KENTFIELD	State CA	Zip Code 94914-0578
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2014

**Transaction ID : 2014M04L11AI04965**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1191.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1760 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. JOHN MILTON PETERSON II**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3521 16TH STREET COURT  
 City State Zip Code  
 ROCK ISLAND IL 61201-6122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MEDICAL ARTS ASSOCIATES, LTD. PHYSICIAN  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI04966**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. JOSEPHINE PETERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3080 TULAROSA LANE  
 City State Zip Code  
 LAS VEGAS NV 89122-3348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI04967**  
 Amount of Each Receipt this Period  
 90.00

**C. MRS. MARY L. PETERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 385 CAROLINA MEADOWS VILLA  
 City State Zip Code  
 CHAPEL HILL NC 27517-7521  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04968**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	290.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1761 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD W. PETERSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13169 SE RIVER ROAD  
 APARTMENT 102PH  
 City PORTLAND State OR Zip Code 97222-9781  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04969**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. BRUCE A. PETESCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2792 MT VERNON HICKORY MTN ROAD  
 City SILER CITY State NC Zip Code 27344-6612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer OGLETREE DEAKINS LAW FIRM Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI04970**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. BRUCE A. PETESCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2792 MT VERNON HICKORY MTN ROAD  
 City SILER CITY State NC Zip Code 27344-6612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer OGLETREE DEAKINS LAW FIRM Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04971**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1762 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GLENN A. PETKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 99  
 City MAYODAN State NC Zip Code 27027-0099  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STEWART & PERRY COMPANY, INC. Occupation SUPERINTENDENT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI04972**  
 Amount of Each Receipt this Period  
**250.00**

**B. MRS. ELAINE MARIE PETOUHOFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18528 RENWICK STREET  
 City LIVONIA State MI Zip Code 48152-2874  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1650.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04973**  
 Amount of Each Receipt this Period  
**550.00**

**C. MRS. ELAINE MARIE PETOUHOFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18528 RENWICK STREET  
 City LIVONIA State MI Zip Code 48152-2874  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1650.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04974**  
 Amount of Each Receipt this Period  
**550.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1350.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1763 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JULIE A. PETRACCA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 342 ORANGE STREET  
 APARTMENT 10  
 City NEWARK State NJ Zip Code 07103-2851  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **275.00**

Date of Receipt: **03 / 04 / 2014**  
**Transaction ID : 2014M04L11AI04975**  
 Amount of Each Receipt this Period: **100.00**

**B. MRS. TONI PETRELLA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2721 MAGNET STREET  
 City NORTH LAS VEGAS State NV Zip Code 89030-5433  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **NEUIS LODGING** Occupation: **HOUSEKEEPING**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **03 / 12 / 2014**  
**Transaction ID : 2014M04L11AI04976**  
 Amount of Each Receipt this Period: **50.00**

**C. MRS. TONI PETRELLA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2721 MAGNET STREET  
 City NORTH LAS VEGAS State NV Zip Code 89030-5433  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **NEUIS LODGING** Occupation: **HOUSEKEEPING**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI04977**  
 Amount of Each Receipt this Period: **50.00**

**SUBTOTAL** of Receipts This Page (optional)..... **200.00**  
**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 1764 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LOUIS J. PETRIELLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 526 TOWNSHIP LINE ROAD  
 SUITE 200  
 City BLUE BELL State PA Zip Code 19422-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI04978**  
 Amount of Each Receipt this Period 50.00

**B. MR. LOUIS J. PETRIELLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 526 TOWNSHIP LINE ROAD  
 SUITE 200  
 City BLUE BELL State PA Zip Code 19422-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04979**  
 Amount of Each Receipt this Period 50.00

**C. MR. LOUIS J. PETRIELLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 526 TOWNSHIP LINE ROAD  
 SUITE 200  
 City BLUE BELL State PA Zip Code 19422-2738  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI04980**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00  
**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 1765 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. AUGUSTA H. PETRONE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address POST OFFICE BOX 1037

City DUBLIN	State NH	Zip Code 03444-1037
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation REQUESTED
--------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04981**

Amount of Each Receipt this Period  
 15000.00

**B. MR. JERRY W. PEVETO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 231

City NOME	State TX	Zip Code 77629-0231
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation FARMER
-----------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04982**

Amount of Each Receipt this Period  
 120.00

**C. MR. MURRAY S. PEYTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18 SCUDDER COURT

City PENNINGTON	State NJ	Zip Code 08534-2325
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
381.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI04983**

Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15121.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1766 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MURRAY S. PEYTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18 SCUDDER COURT  
 City PENNINGTON State NJ Zip Code 08534-2325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 381.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI04984**  
 Amount of Each Receipt this Period  
 120.00

**B. MRS. PATRICIA L. PFAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15332 S.E. 46TH WAY  
 City BELLEVUE State WA Zip Code 98006-3231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 396.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI04985**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. PATRICIA L. PFAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15332 S.E. 46TH WAY  
 City BELLEVUE State WA Zip Code 98006-3231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 396.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04986**  
 Amount of Each Receipt this Period  
 65.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	235.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1767 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PATRICIA L. PFAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15332 S.E. 46TH WAY  
 City BELLEVUE State WA Zip Code 98006-3231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **396.00**

Date of Receipt: **03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI04987**  
 Amount of Each Receipt this Period: **50.00**

**B. MRS. PATRICIA L. PFAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15332 S.E. 46TH WAY  
 City BELLEVUE State WA Zip Code 98006-3231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **396.00**

Date of Receipt: **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI04988**  
 Amount of Each Receipt this Period: **51.00**

**C. MR. RICHARD DUANE PFEIFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 451 MALLEY DRIVE UNIT 209  
 City NORTHGLENN State CO Zip Code 80233-2064  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1209.00**

Date of Receipt: **03 / 03 / 2014**  
**Transaction ID : 2014M04L11AI04989**  
 Amount of Each Receipt this Period: **50.00**

**SUBTOTAL** of Receipts This Page (optional)..... **151.00**  
**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 1769 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GRAYDON J. PFEIFFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4451 COASTLINE AVENUE  
 City CARLSBAD State CA Zip Code 92008-3669  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI04993**  
 Amount of Each Receipt this Period 100.00

**B. MR. GRAYDON J. PFEIFFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4451 COASTLINE AVENUE  
 City CARLSBAD State CA Zip Code 92008-3669  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI04994**  
 Amount of Each Receipt this Period 101.00

**C. MR. JOSEPH B. PHAIR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 120 SAN BENITO WAY  
 City SAN FRANCISCO State CA Zip Code 94127-2016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI04995**  
 Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ► 1201.00  
**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 1770 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SANY PHAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 75 LYERLY STREET  
APARTMENT 539

City HOUSTON State TX Zip Code 77022-3069

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation NAIL SHOP OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
03 / 05 / 2014  
**Transaction ID : 2014M04L11AI04996**

Amount of Each Receipt this Period  
100.00

**B. MR. JOHN R. PHIFER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1136 PHIFER ROAD

City KINGS MOUNTAIN State NC Zip Code 28086-8207

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
291.00

Date of Receipt  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI04997**

Amount of Each Receipt this Period  
35.00

**C. MR. JOHN R. PHIFER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1136 PHIFER ROAD

City KINGS MOUNTAIN State NC Zip Code 28086-8207

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
291.00

Date of Receipt  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI04998**

Amount of Each Receipt this Period  
55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 190.00

**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 1771 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN R. PHIFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1136 PHIFER ROAD  
 City Kings Mountain State NC Zip Code 28086-8207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI04999**  
 Amount of Each Receipt this Period 36.00

**B. MR. PETER VAN NESS PHILIP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 49 MAPLE STREET #223 EQUIONOX VILLAGE  
 City Manchester Center State VT Zip Code 05255-4478  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05000**  
 Amount of Each Receipt this Period 110.00

**C. DR. DEXTER LEE PHILLIPS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7260 WEMBLEY TERRACE WEST  
 City Toledo State OH Zip Code 43617-2239  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05001**  
 Amount of Each Receipt this Period 66.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 212.00  
**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 1772 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JACK L. PHILLIPS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1686  
 City GLADEWATER State TX Zip Code 75647-1686  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OIL EXPLORATION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05002**  
 Amount of Each Receipt this Period  
 600.00

**B. MS. JUDITH A. PHILLIPS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 BLACKBERRY LANE  
 City NORTH CALDWELL State NJ Zip Code 07006-4169  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ACCENTER Occupation MANAGEMENT CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05003**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. LEWIS PHILLIPS III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30 ISLAND VIEW DRIVE  
 City NEWPORT NEWS State VA Zip Code 23602-7471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05004**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 851.00  
**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 1773 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LEWIS PHILLIPS III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30 ISLAND VIEW DRIVE  
 City NEWPORT NEWS State VA Zip Code 23602-7471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05005**  
 Amount of Each Receipt this Period 100.00

**B. MRS. STEWART PHILLIPS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1288 HUNTER BLVD.  
 City BOONVILLE State IN Zip Code 47601-8713  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TRUSS SYSTEMS INC. Occupation SECRETARY-TREASURER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI05006**  
 Amount of Each Receipt this Period 300.00

**C. MRS. BILLIE C. PHINNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4520 PHINNEY ROAD  
 City MERETA State TX Zip Code 76940-9723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1295.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI05007**  
 Amount of Each Receipt this Period 80.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	480.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1774 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BILLIE C. PHINNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4520 PHINNEY ROAD  
 City MERETA State TX Zip Code 76940-9723  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1295.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05008**  
 Amount of Each Receipt this Period 750.00

**B. MR. MICHAEL J. PHIPPS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 BRIARWOOD LANE  
 City BEAVER State WV Zip Code 25813-9758  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PATRIOT COAL Occupation OPERATIONS MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05009**  
 Amount of Each Receipt this Period 500.00

**C. MR. THAO PHUNG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9278 ADELPHI ROAD #301  
 City HYATTSVILLE State MD Zip Code 20783-2031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JOHN G. WEBSTER Occupation HVAC TECHNICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05010**  
 Amount of Each Receipt this Period 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1775 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THAO PHUNG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9278 ADELPHI ROAD #301  
 City State Zip Code  
 HYATTSVILLE MD 20783-2031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 JOHN G. WEBSTER HVAC TECHNICIAN  
 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  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05011**  
 Amount of Each Receipt this Period  
 50.00

**B. MRS. RUTH C. PICKARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 63 PLUM STREET  
 City State Zip Code  
 SOUTHAMPTON NJ 08088-3312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05012**  
 Amount of Each Receipt this Period  
 111.00

**C. MR. KURT PICKERING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 206 BLUEWATER CT  
 City State Zip Code  
 LA VERGNE TN 37086-2659  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 U.S GOVERMENT GOVERNMENT SERVICE  
 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  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05013**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 461.00  
**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 1776 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHAND E. PICKERING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1140 EASY STREET  
 City SUWANEE State GA Zip Code 30024-4249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NATIONAL BANC SWAP, L.L.C. Occupation INTERNET  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05014**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. RICHAND E. PICKERING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1140 EASY STREET  
 City SUWANEE State GA Zip Code 30024-4249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NATIONAL BANC SWAP, L.L.C. Occupation INTERNET  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05015**  
 Amount of Each Receipt this Period  
 100.00

**C. DR. JOHN PIDGEON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 749 SOUTH 30TH STREET  
 APARTMENT 144  
 City GRAND FORKS State ND Zip Code 58201-4078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COMPHEALTH Occupation NEUROLOGIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05016**  
 Amount of Each Receipt this Period  
 201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	421.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1777 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LARRY PIEBENGA**  
Full Name (Last, First, Middle Initial)

Mailing Address 4010 W. 57TH STREET

City FAIRWAY State KS Zip Code 66205-2750

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05017**

Amount of Each Receipt this Period  
 500.00

**B. MR. ANTHONY J. PIERCE**  
Full Name (Last, First, Middle Initial)

Mailing Address 940 PEMBROKE STREET S.E.

City GRAND RAPIDS State MI Zip Code 49508-6016

FEC ID number of contributing federal political committee. **C**

Name of Employer WAL-MART Occupation RETAIL MANAGER

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  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05018**

Amount of Each Receipt this Period  
 50.00

**C. MRS. ALICE PIETRO HAMMOND**  
Full Name (Last, First, Middle Initial)

Mailing Address 64 DEBS HILL ROAD

City YARMOUTH PORT State MA Zip Code 02675-2506

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 331.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05019**

Amount of Each Receipt this Period  
 111.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 661.00

**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 1778 OF 2949
	(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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. CHARLES M. PIGOTT</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 07 / 2014 <b>Transaction ID : 2014M04L11AI05020</b>
Mailing Address 777 106TH AVENUE NORTHEAST		Amount of Each Receipt this Period 10000.00
City BELLEVUE	State WA	Zip Code 98004-5027
FEC ID number of contributing federal political committee. C	Name of Employer PACCAR, INC.	Occupation CHAIRMAN EMERITUS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) <b>B. MS. TAMARA G. PILCH</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 05 / 2014 <b>Transaction ID : 2014M04L11AI05021</b>
Mailing Address 8726 EWING DRIVE		Amount of Each Receipt this Period 170.00
City BETHESDA	State MD	Zip Code 20817-3641
FEC ID number of contributing federal political committee. C	Name of Employer RETIRED	Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

Full Name (Last, First, Middle Initial) <b>C. MS. TAMARA G. PILCH</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 14 / 2014 <b>Transaction ID : 2014M04L11AI05022</b>
Mailing Address 8726 EWING DRIVE		Amount of Each Receipt this Period 75.00
City BETHESDA	State MD	Zip Code 20817-3641
FEC ID number of contributing federal political committee. C	Name of Employer RETIRED	Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10245.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1779 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD TERENCE PILOTTE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 401 STATE STREET, UNIT P209  
 UNIT P209  
 City PORTSMOUTH State NH Zip Code 03801-4031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation FACILITY MANAGER  
 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  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05023**  
 Amount of Each Receipt this Period  
 200.00

**B. MS. RUTH F. PINEO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 146 19TH AVENUE NE  
 City SAINT PETERSBURG State FL Zip Code 33704-4531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 272.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05024**  
 Amount of Each Receipt this Period  
 45.00

**C. MS. RUTH F. PINEO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 146 19TH AVENUE NE  
 City SAINT PETERSBURG State FL Zip Code 33704-4531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 272.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05025**  
 Amount of Each Receipt this Period  
 47.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	292.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1780 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GARY J. PINKOWSKI**  
Full Name (Last, First, Middle Initial)

Mailing Address 95 MADISON AVENUE

City FANWOOD State NJ Zip Code 07023-1051

FEC ID number of contributing federal political committee. **C**

Name of Employer POST FOODS L.L.C. Occupation SALES EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 795.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05026**

Amount of Each Receipt this Period  
 120.00

**B. MR. GARY J. PINKOWSKI**  
Full Name (Last, First, Middle Initial)

Mailing Address 95 MADISON AVENUE

City FANWOOD State NJ Zip Code 07023-1051

FEC ID number of contributing federal political committee. **C**

Name of Employer POST FOODS L.L.C. Occupation SALES EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 795.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05027**

Amount of Each Receipt this Period  
 20.00

**C. MR. GARY J. PINKOWSKI**  
Full Name (Last, First, Middle Initial)

Mailing Address 95 MADISON AVENUE

City FANWOOD State NJ Zip Code 07023-1051

FEC ID number of contributing federal political committee. **C**

Name of Employer POST FOODS L.L.C. Occupation SALES EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 795.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05028**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 190.00

**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 1781 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. TODD PIPER</b>		Date of Receipt
Mailing Address 17440 GREEN PINE WAY		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
YORBA LINDA	CA	92886-5175
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI05029</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. WINFIELD W. PIPER</b>		Date of Receipt
Mailing Address 402 PROSPECT AVENUE		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
DOWNINGTOWN	PA	19335-2835
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI05030</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="101.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="221.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. DAVID W. PIPPIN</b>		Date of Receipt
Mailing Address 320 ARIES DRIVE		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
ORANGE PARK	FL	32073-3262
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI05031</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="91.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="231.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="692.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 1782 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. DR. BERNARD THOMAS PITSVADA</b>		Date of Receipt										
Mailing Address 2201 TRINIDAD STREET		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>31</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	31	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	31	/	2014								
City State Zip Code FALLS CHURCH VA 22043-1930		<b>Transaction ID : 2014M04L11AI05032</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>101.00</b>										
Name of Employer RETIRED	Occupation RETIRED											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>201.00</b>											

Full Name (Last, First, Middle Initial) <b>B. MR. CHARLES PITTELKOW</b>		Date of Receipt										
Mailing Address 4191 BAY BEACH LANE APARTMENT 275		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>25</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	25	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	25	/	2014								
City State Zip Code FORT MYERS BEACH FL 33931-5976		<b>Transaction ID : 2014M04L11AI05032</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>101.00</b>										
Name of Employer THE EQUITABLE BANK	Occupation BANKER											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>321.00</b>											

Full Name (Last, First, Middle Initial) <b>C. MR. TREVOR PITTS</b>		Date of Receipt										
Mailing Address 1236 B. STREET		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>11</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	11	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	11	/	2014								
City State Zip Code PETALUMA CA 94952-4065		<b>Transaction ID : 2014M04L11AI05034</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>										
Name of Employer SELF-EMPLOYED	Occupation INVESTOR											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>250.00</b>											

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>452.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1783 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. ROBERT PITZER</b>		Date of Receipt 03 / 07 / 2014 <b>Transaction ID : 2014M04L11AI05035</b>
Mailing Address 1000 PARKVIEW DRIVE APARTMENT 511		Amount of Each Receipt this Period 100.00
City HALLANDALE BEACH	State FL	
Zip Code 33009-2931		Aggregate Year-to-Date ▼ 257.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. MR. ROBERT PITZER</b>		Date of Receipt 03 / 13 / 2014 <b>Transaction ID : 2014M04L11AI05036</b>
Mailing Address 1000 PARKVIEW DRIVE APARTMENT 511		Amount of Each Receipt this Period 56.00
City HALLANDALE BEACH	State FL	
Zip Code 33009-2931		Aggregate Year-to-Date ▼ 257.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. MR. ROBERT PITZER</b>		Date of Receipt 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI05037</b>
Mailing Address 1000 PARKVIEW DRIVE APARTMENT 511		Amount of Each Receipt this Period 51.00
City HALLANDALE BEACH	State FL	
Zip Code 33009-2931		Aggregate Year-to-Date ▼ 257.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	207.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1784 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LEONARD H. PIVNICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 675 OCEAN AVENUE  
 APARTMENT 10A  
 City LONG BRANCH State NJ Zip Code 07740-5101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05038**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. FRED PIZOV**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1611 RAYMOND STREET  
 City FAIR LAWN State NJ Zip Code 07410-1940  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NEW YORK CITY S.C.A. Occupation ENGINEER  
 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  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05039**  
 Amount of Each Receipt this Period  
 30.00

**C. MR. FRED PIZOV**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1611 RAYMOND STREET  
 City FAIR LAWN State NJ Zip Code 07410-1940  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NEW YORK CITY S.C.A. Occupation ENGINEER  
 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  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05040**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	380.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1785 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THEODORE C. PLACE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 410 PLACE ROAD

City MESHOPPEN	State PA	Zip Code 18630-7923
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05041**

Amount of Each Receipt this Period  
 120.00

**B. MR. THEODORE C. PLACE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 410 PLACE ROAD

City MESHOPPEN	State PA	Zip Code 18630-7923
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05042**

Amount of Each Receipt this Period  
 50.00

**C. MR. THEODORE C. PLACE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 410 PLACE ROAD

City MESHOPPEN	State PA	Zip Code 18630-7923
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05043**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	220.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1786 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. R. B. PLANK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1505 MASSACHUSETTS AVENUE #1  
 City LEXINGTON State MA Zip Code 02420-3810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05044**  
 Amount of Each Receipt this Period  
 200.00

**B. MS. PAULINE M. PLANTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6994 WHEELER ROAD  
 City LULA State GA Zip Code 30554-2612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05045**  
 Amount of Each Receipt this Period  
 20.00

**C. MS. PAULINE M. PLANTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6994 WHEELER ROAD  
 City LULA State GA Zip Code 30554-2612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05046**  
 Amount of Each Receipt this Period  
 5.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1787 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. PAULINE M. PLANTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6994 WHEELER ROAD  
 City LULA State GA Zip Code 30554-2612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05047**  
 Amount of Each Receipt this Period  
 20.00

**B. MS. PAULINE M. PLANTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6994 WHEELER ROAD  
 City LULA State GA Zip Code 30554-2612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05048**  
 Amount of Each Receipt this Period  
 11.00

**C. MS. PAULINE M. PLANTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6994 WHEELER ROAD  
 City LULA State GA Zip Code 30554-2612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05049**  
 Amount of Each Receipt this Period  
 5.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	36.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1788 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LARRY F. PLASTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13 JUNIPER COURT  
 City State Zip Code  
 PRESCOTT AZ 86305-5085  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05050**  
 Amount of Each Receipt this Period  
 75.00

**B. MR. LARRY F. PLASTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13 JUNIPER COURT  
 City State Zip Code  
 PRESCOTT AZ 86305-5085  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05051**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. STEPHEN R. PLASTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2130 S JEFFERSON AVE  
 City State Zip Code  
 LEBANON MO 65536-4529  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 EVERGREEN INVESTMENTS PRESIDENT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 9800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05052**  
 Amount of Each Receipt this Period  
 9800.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 9995.00  
**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 1789 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRIAN PLATT**  
Full Name (Last, First, Middle Initial)

Mailing Address 9936 E. COUNTY HIGHWAY 17

City ELLISVILLE	State IL	Zip Code 61431-9431
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SPOON RIVER HOME HEALTH SERVICES	Occupation ADMINISTRATOR
--	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05053**

Amount of Each Receipt this Period  
60.00

**B. MRS. CAROL PLATT**  
Full Name (Last, First, Middle Initial)

Mailing Address 6530 ROCKING HORSE AVENUE

City LAS VEGAS	State NV	Zip Code 89108-5335
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CLEAN-UP TIME, INC.	Occupation SECRETARY
---	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
236.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05054**

Amount of Each Receipt this Period  
116.00

**C. MRS. CAROL PLATT**  
Full Name (Last, First, Middle Initial)

Mailing Address 6530 ROCKING HORSE AVENUE

City LAS VEGAS	State NV	Zip Code 89108-5335
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CLEAN-UP TIME, INC.	Occupation SECRETARY
---	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
236.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05055**

Amount of Each Receipt this Period  
120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	296.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1790 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LEROY W. PLEKENPOL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 OUTERBRIDGE CIRCLE  
 City State Zip Code  
 HILTON HEAD ISLAND SC 29926-2915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05056**  
 Amount of Each Receipt this Period  
 50.00

**B. DR. HARRY E. PLUMBLEE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2318 SAINT DAVIDS SQUARE NW  
 City State Zip Code  
 KENNESAW GA 30152-6705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05057**  
 Amount of Each Receipt this Period  
 750.00

**C. MR. J. MICHAEL POCOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5100 BROOKVIEW DRIVE  
 City State Zip Code  
 DALLAS TX 75220-2206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 YELL GROUP P.L.C. MEDIA MANAGEMENT  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05058**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1791 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DIANNE POE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 505 SE ASHEVILLE DRIVE  
 City State Zip Code  
 LEES SUMMIT MO 64063-1066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05059**  
 Amount of Each Receipt this Period  
 201.00

**B. MRS. DONALD POE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16549 MERRILL COURT  
 City State Zip Code  
 CHAGRIN FALLS OH 44023-1159  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI05060**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. PAUL M. POFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1701 PINE EDGE LANE  
 City State Zip Code  
 RICHMOND VA 23229-4069  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05061**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 501.00  
**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 1792 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. PAUL M. POFF**

Mailing Address 1701 PINE EDGE LANE

City State Zip Code  
RICHMOND VA 23229-4069

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05062**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**B. MR. ANTHONY E. POGODZINSKI**

Mailing Address 9609 MANITOU PARK DRIVE

City State Zip Code  
MINOCQUA WI 54548-9362

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05063**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**C. MR. ANTHONY E. POGODZINSKI**

Mailing Address 9609 MANITOU PARK DRIVE

City State Zip Code  
MINOCQUA WI 54548-9362

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05064**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 570.00

**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 1793 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD W. POGUE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 901 LAKESIDE AVENUE E.  
 City CLEVELAND State OH Zip Code 44114-1163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15461.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05065**  
 Amount of Each Receipt this Period  
 121.00

**B. MR. GREG POHLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address POBOX 9569  
 City BRECKENRIDGE State CO Zip Code 80424-9013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NOT EMPLOYED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05066**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. JACK E. POHRER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 505 N. 7TH STREET SUITE 2405  
 City SAINT LOUIS State MO Zip Code 63101-1613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SAINT LOUIS PARKING COMPANY Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 745.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05067**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	871.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1794 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENNETH POLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24452 MOONFIRE DRIVE  
 City DANA POINT State CA Zip Code 92629-1765  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1115.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05068**  
 Amount of Each Receipt this Period  
 150.00

**B. MR. KENNETH POLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24452 MOONFIRE DRIVE  
 City DANA POINT State CA Zip Code 92629-1765  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1115.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05069**  
 Amount of Each Receipt this Period  
 150.00

**C. MR. WILLIAM A. POLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 302 HIDDEN ACRES DRIVE  
 City BEDFORD State IN Zip Code 47421-9135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05070**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00  
**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 1795 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GLEN R. POLLARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1978  
 City LUBBOCK State TX Zip Code 79408-1978  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer POLLARD FRIENDLY FORD Occupation AUTO DEALER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05071**  
 Amount of Each Receipt this Period 120.00

**B. MR. OLIVER A. POLLARD JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1587 WESTOVER AVENUE  
 City PETERSBURG State VA Zip Code 23805-1203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI05072**  
 Amount of Each Receipt this Period 50.00

**C. MR. ROBERT C. POLLENTIER SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 107 OAKDALE  
 City SCHERTZ State TX Zip Code 78154-2420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05073**  
 Amount of Each Receipt this Period 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	290.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1796 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. ROBERT C. POLLENTIER SR.</b>		Date of Receipt
Mailing Address 107 OAKDALE		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
SCHERTZ	TX	78154-2420
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI05074</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="420.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MS. DIANA CLAIRE POLLIN</b>		Date of Receipt
Mailing Address 45 RUE DE LA TURBINE EDEN ROC 2		<input type="text" value="03"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
MARSEILLE	NY	13008
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI05075</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MS. DIANA CLAIRE POLLIN</b>		Date of Receipt
Mailing Address 45 RUE DE LA TURBINE EDEN ROC 2		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
MARSEILLE	NY	13008
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI05076</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="175.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 1797 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. DIANA CLAIRE POLLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 45 RUE DE LA TURBINE  
 EDEN ROC 2  
 City MARSEILLE State NY Zip Code 13008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05077**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. DONALD E. POLLOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2081 FORTY NINER ROAD  
 City PELHAM State GA Zip Code 31779-6017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05078**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. DONALD E. POLLOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2081 FORTY NINER ROAD  
 City PELHAM State GA Zip Code 31779-6017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05079**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	425.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1798 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT DEE POLLOCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 629 DELREY ROAD  
 City WHITEFISH State MT Zip Code 59937-8018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05080**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. JAMES C. PONTIOUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7018 DOMINION LANE  
 City LAKEWOOD RANCH State FL Zip Code 34202-5030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI05081**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. SHIRLEY L. PONTIUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 512 MILL ROAD  
 City SELINGROVE State PA Zip Code 17870-9119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05082**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	301.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1799 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BILLY G. POOL**  
Full Name (Last, First, Middle Initial)

Mailing Address 58 WOLCOTT ROAD

City AKRON State OH Zip Code 44313-4339

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE DEVELOPMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05083**

Amount of Each Receipt this Period  
 500.00

**B. MRS. SHARON T. POOLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 18 LENOX ROAD

City SUMMIT State NJ Zip Code 07901-3733

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05084**

Amount of Each Receipt this Period  
 500.00

**C. MR. NICHOLAS A. POPA**  
Full Name (Last, First, Middle Initial)

Mailing Address 614 PLUMTREE LANE

City FENTON State MI Zip Code 48430-4206

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05085**

Amount of Each Receipt this Period  
 125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1125.00

**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 1800 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES POPE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5509 BENTGREEN DRIVE  
 City DALLAS State TX Zip Code 75248-2013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05086**  
 Amount of Each Receipt this Period  
 250.00

**B. DR. MARTIN B. POPP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3530 BAYARD DRIVE  
 City CINCINNATI State OH Zip Code 45208-1602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN/SURGEON  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05087**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. PELLEGRINO P. PORRARO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 157 PLANTATION CIRCLE S.  
 City PONTE VEDRA State FL Zip Code 32082-3933  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05088**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1801 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PELLEGRINO P. PORRARO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 157 PLANTATION CIRCLE S.  
 City State Zip Code  
 PONTE VEDRA FL 32082-3933  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05089**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. CHARLES R. PORTER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 N. UPPER BROADWAY STREET  
 APARTMENT 1012  
 City State Zip Code  
 CORPUS CHRISTI TX 78401-2750  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05090**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. SHERRON H. PORTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 585 E. 120 S.  
 City State Zip Code  
 SMITHFIELD UT 84335-1201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05091**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1802 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES H. POSEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 249  
 City State Zip Code  
 DOUBLE SPRINGS AL 35553-0249  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 POSEY SUPPLY COMPANY, INC. PRESIDENT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05092**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. MARY E. POSONT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 42011 BRENTWOOD DRIVE  
 City State Zip Code  
 PLYMOUTH MI 48170-2670  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05093**  
 Amount of Each Receipt this Period  
 65.00

**C. MS. CINDY POTTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8991 SUNSET RIDGE CT  
 City State Zip Code  
 HIGHLANDS RANCH CO 80126-2647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 UNITED HEALTHCARE GROUP RN CASE MANAGER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05094**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 190.00  
**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 1803 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GREG A. POTTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 220 CARRIE STREET S.E.

City CLEVELAND State TN Zip Code 37323-6623

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05095**

Amount of Each Receipt this Period  
 105.00

**B. MR. JAMES H. POTTS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1809 HIGHWAY 278 E

City MONTICELLO State AR Zip Code 71655-9192

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation DENTIST

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  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05096**

Amount of Each Receipt this Period  
 300.00

**C. MR. CLYDE R. POWELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 805 W. 19TH STREET

City PORTALES State NM Zip Code 88130-7103

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05097**

Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	515.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1804 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES L. POWELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1311 S. MADISON STREET

City SAN ANGELO State TX Zip Code 76901-4444

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF - EMPLOYED Occupation LIVESTOCK FARMING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05098**

Amount of Each Receipt this Period  
 100.00

**B. MR. RICHARD GRAY POWERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 6843 WESTLAKE AVENUE

City DALLAS State TX Zip Code 75214-3446

FEC ID number of contributing federal political committee. **C**

Name of Employer LONE STAR LAND & ENERGY II, LLC Occupation PETROLEUM LAND MAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05099**

Amount of Each Receipt this Period  
 1000.00

**C. MR. ROGER W. POWERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 14133 N. 102ND STREET

City SCOTTSDALE State AZ Zip Code 85260-9221

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05100**

Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1805 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM POWERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1306 E. MAIN STREET

City PRINCETON State WV Zip Code 24740-3044

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05101**

Amount of Each Receipt this Period  
100.00

**B. MS. SUSAN PAYNE POYNOR**  
Full Name (Last, First, Middle Initial)

Mailing Address 6887 HIGH COUNTRY DRIVE

City FORT WORTH State TX Zip Code 76132-3057

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05102**

Amount of Each Receipt this Period  
250.00

**C. MS. DENISE POZDERAC**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 624  
TRANSITIONAL LIVING CENTERS

City VALLEY CITY State OH Zip Code 44280-0624

FEC ID number of contributing federal political committee. **C**

Name of Employer TRANSITIONAL LIVING CENTERS, INC. Occupation L.T.C. ADMINISTRATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05103**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 470.00

**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 1806 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. DENISE POZDERAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 624  
 TRANSITIONAL LIVING CENTERS  
 City VALLEY CITY State OH Zip Code 44280-0624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TRANSITIONAL LIVING CENTERS, INC. Occupation L.T.C. ADMINISTRATOR  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **355.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05104**  
 Amount of Each Receipt this Period  
**100.00**

**B. MR. JORGE A. PRADO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 630 W. VALENCIA MESA DRIVE  
 City FULLERTON State CA Zip Code 92835-4004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI05105**  
 Amount of Each Receipt this Period  
**25.00**

**C. MR. GERALD F. PRANGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29 LASSWADE DRIVE  
 City PINEHURST State NC Zip Code 28374-6703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **341.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05106**  
 Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>225.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1807 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GERALD F. PRANGE**  
Full Name (Last, First, Middle Initial)

Mailing Address 29 LASSWADE DRIVE

City PINEHURST State NC Zip Code 28374-6703

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 341.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05107**

Amount of Each Receipt this Period  
 50.00

**B. MR. GERALD F. PRANGE**  
Full Name (Last, First, Middle Initial)

Mailing Address 29 LASSWADE DRIVE

City PINEHURST State NC Zip Code 28374-6703

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 341.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05108**

Amount of Each Receipt this Period  
 1.00

**C. MR. ANTHONY L. PRATER**  
Full Name (Last, First, Middle Initial)

Mailing Address 11304 N. RUDELLA ROAD

City MEQUON State WI Zip Code 53092-2766

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05109**

Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 52.00

**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 1808 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. CHARLES E. PRATHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10047 EDGECOMBE PLACE N. E.  
 City BAINBRIDGE ISLAND State WA Zip Code 98110-4333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05110**  
 Amount of Each Receipt this Period  
 55.00

**B. DR. CHARLES E. PRATHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10047 EDGECOMBE PLACE N. E.  
 City BAINBRIDGE ISLAND State WA Zip Code 98110-4333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05111**  
 Amount of Each Receipt this Period  
 55.00

**C. MR. EDWARD PRATT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 468 MARINER DRIVE  
 City JUPITER State FL Zip Code 33477-4068  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05112**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1110.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1809 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BARNARD J. PRENNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2530 NE 35TH STREET  
 City LIGHHOUSE POINT State FL Zip Code 33064-8157  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CAMPBELL ROSEMOYGER Occupation ROOFER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05113**  
 Amount of Each Receipt this Period 200.00

**B. MR. NEAL A. PRESLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27848 COUNTY ROAD 72  
 City OPP State AL Zip Code 36467-5571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LARRYLS PRESCRIPTIONS, INC. Occupation PHARMACIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05114**  
 Amount of Each Receipt this Period 111.00

**C. MRS. GRADY PRESTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10614 PINKNEY LANE  
 City AUSTIN State TX Zip Code 78739-1664  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05115**  
 Amount of Each Receipt this Period 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	411.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1810 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CLYDE L. PRESTWOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1801 LAVACA STREET  
 APARTMENT 10D  
 City AUSTIN State TX Zip Code 78701-1307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05116**  
 Amount of Each Receipt this Period 185.00

**B. MR. ANDREW E. PRICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1134 OMAN DRIVE  
 City BRENTWOOD State TN Zip Code 37027-4119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05117**  
 Amount of Each Receipt this Period 250.00

**C. MR. DAVID T. PRICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6401 LYONS ROAD  
 City COCONUT CREEK State FL Zip Code 33073-3602  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05118**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 635.00  
**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 1811 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DOUGLAS PRICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 990  
 City CHESTERTOWN State MD Zip Code 21620-0990  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05119**  
 Amount of Each Receipt this Period  
 750.00

**B. MR. ROY R. PRIEST JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3242 GOLFING GREEN PLACE  
 City DALLAS State TX Zip Code 75234-3760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05120**  
 Amount of Each Receipt this Period  
 121.00

**C. MRS. SALLY H. PRILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5590 NORWICH PKWY APT 426  
 City OAK PARK HEIGHTS State MN Zip Code 55082-4577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05121**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	921.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1812 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. HENRY PRIME**

Mailing Address 726 ROMAINE LANE

City State Zip Code  
HOUSTON TX 77090-1319

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05122**

Amount of Each Receipt this Period  
101.00

Full Name (Last, First, Middle Initial)  
**B. MR. SCOTT C. PRINCE**

Mailing Address 400 ALLIED COURT

City State Zip Code  
ZEELAND MI 49464-2219

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
ALLIED BUSINESS SERVICES PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05123**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. MR. C. AUSTIN PRITCHARD JR.**

Mailing Address 10 WILLWAY AVENUE

City State Zip Code  
RICHMOND VA 23226-1334

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05124**

Amount of Each Receipt this Period  
220.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 571.00

**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 1813 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANCIS D. PRIVITERA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26 FROST STREET  
 City ARLINGTON State MA Zip Code 02474-1039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05125**  
 Amount of Each Receipt this Period 120.00

**B. MR. FRANCIS D. PRIVITERA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26 FROST STREET  
 City ARLINGTON State MA Zip Code 02474-1039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI05126**  
 Amount of Each Receipt this Period 100.00

**C. MRS. KAREN L. PROCTOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17402 NE 22ND STREET  
 City REDMOND State WA Zip Code 98052-6054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05127**  
 Amount of Each Receipt this Period 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	320.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1814 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD L. PROFILI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 33 OLD COACH ROAD  
 City NAPA State CA Zip Code 94558-3858  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05128**  
 Amount of Each Receipt this Period  
 5000.00

**B. MRS. HELEN L. PROSHEK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2203 CYPRESS POINT W.  
 City AUSTIN State TX Zip Code 78746-7114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05129**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. HELEN L. PROSHEK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2203 CYPRESS POINT W.  
 City AUSTIN State TX Zip Code 78746-7114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05130**  
 Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5110.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1815 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CHARLENE A. PROSNIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8011 HILLINGDON DRIVE  
 City State Zip Code  
 POWELL OH 43065-7074  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05131**  
 Amount of Each Receipt this Period  
 500.00

**B. MS. JUDITH PROSSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 190  
 City State Zip Code  
 WINSLOW AZ 86047-0190  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED RANCHER  
 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  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05132**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. RUSTY S. PROTHRO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 16311  
 City State Zip Code  
 PANAMA CITY FL 32406-6311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 WATERWORX CAR WASH OWNER  
 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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05133**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00  
**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 1816 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MURRAY D. PROVINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 450 ROME BEAUTY LANE  
 City CLARKESVILLE State GA Zip Code 30523-8402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer P.C. FARMS, LLC Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05134**  
 Amount of Each Receipt this Period  
 220.00

**B. MR. ROBERT E. PROVOST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 GERMANDER COURT  
 City GREENVILLE State SC Zip Code 29615-6157  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 386.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05135**  
 Amount of Each Receipt this Period  
 251.00

**C. MRS. CAROL PRUCHNIC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 162 LAUREN LANE  
 City JOHNSTOWN State PA Zip Code 15905-4805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05136**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 591.00  
**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 1817 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CAROL PRUCHNIC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 162 LAUREN LANE  
 City JOHNSTOWN State PA Zip Code 15905-4805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **470.00**

Date of Receipt: **03 / 14 / 2014**  
**Transaction ID : 2014M04L11AI05137**  
 Amount of Each Receipt this Period: **120.00**

**B. MR. ROBERT E. PUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 704 IVANHOE DRIVE  
 City FLORENCE State SC Zip Code 29505-3612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **FRANCIS MARION UNIVERSITY** Occupation: **PROFESSOR OF BUSINESS**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **03 / 14 / 2014**  
**Transaction ID : 2014M04L11AI05138**  
 Amount of Each Receipt this Period: **200.00**

**C. MR. ROBERT E. PUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 704 IVANHOE DRIVE  
 City FLORENCE State SC Zip Code 29505-3612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **FRANCIS MARION UNIVERSITY** Occupation: **PROFESSOR OF BUSINESS**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI05139**  
 Amount of Each Receipt this Period: **200.00**

**SUBTOTAL** of Receipts This Page (optional)..... **520.00**  
**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 1818 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM W. PULLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 69 REDBUD TRACE  
 City OXFORD State OH Zip Code 45056-8011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer D.M.W. ENTERPRISES, INC. Occupation REAL ESTATE MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05140**  
 Amount of Each Receipt this Period  
 101.00

**B. MR. ELLSWORTH PURDY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1040  
 City VANCOUVER State WA Zip Code 98666-1040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05141**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. WILLIAM BRUCE PURTLEBAUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2210 BERKLEY WAY  
 City LEHIGH ACRES State FL Zip Code 33973-6009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05142**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	401.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1819 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THEODORE BRADLEY PURVIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 9908 BLACK TWIG CT.

City TOANO	State VA	Zip Code 23168-9636
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer UNITED AIRLINES	Occupation PILOT
-------------------------------------	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
294.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2014

**Transaction ID : 2014M04L11AI05143**

Amount of Each Receipt this Period  
25.00

**B. MR. THEODORE BRADLEY PURVIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 9908 BLACK TWIG CT.

City TOANO	State VA	Zip Code 23168-9636
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer UNITED AIRLINES	Occupation PILOT
-------------------------------------	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
294.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2014

**Transaction ID : 2014M04L11AI05144**

Amount of Each Receipt this Period  
25.00

**C. MR. STEVE PUSCIAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 310 W. SAINT ANTHONY LANE

City FLORISSANT	State MO	Zip Code 63031-6821
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

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
03	/	14	/	2014

**Transaction ID : 2014M04L11AI05145**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1820 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DIANA PUTNAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 157 TALLWOOD DRIVE

City SOUTHINGTON State CT Zip Code 06489-2831

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05146**

Amount of Each Receipt this Period  
 340.00

**B. MR. WILLIAM C. PUTNAM JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 717 E. HIGHLAND AVENUE

City CARTHAGE State MO Zip Code 64836-3318

FEC ID number of contributing federal political committee. **C**

Name of Employer TAPJAC COMPANY, INC. Occupation REAL ESTATE MANAGEMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05147**

Amount of Each Receipt this Period  
 250.00

**C. MR. ANDREW F. PUZDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 6307 CARPINTERIA AVENUE  
C/O CKE RESTAURANTS, INC.

City CARPINTERIA State CA Zip Code 93013-2907

FEC ID number of contributing federal political committee. **C**

Name of Employer CKE RESTAURANTS, INC. Occupation C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05148**

Amount of Each Receipt this Period  
 10000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10590.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1821 OF 2949
	<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DEANNA D. PUZDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 570 MEADOW WOOD LANE  
 City MONTECITO State CA Zip Code 93108-2027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **32400.00**

Date of Receipt: **03 / 04 / 2014**  
**Transaction ID : 2014M04L11AI05149**  
 Amount of Each Receipt this Period: **32400.00**

**B. ANTHONY PYTKO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6015 S NATOMA AVE  
 City CHICAGO State IL Zip Code 60638-4113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **03 / 20 / 2014**  
**Transaction ID : 2014M04L11AI05150**  
 Amount of Each Receipt this Period: **300.00**

**C. MRS. LINDA QUAGLIAROLI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 670  
 City HAMPDEN State ME Zip Code 04444-0670  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **SELF-EMPLOYED** Occupation: **RESTAURANT OWNER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **221.00**

Date of Receipt: **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI05151**  
 Amount of Each Receipt this Period: **221.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>32921.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1822 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JOANNE QUALE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9554 41ST STREET NW  
 City NEW TOWN State ND Zip Code 58763-9067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05152**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. JAMES E. QUEEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 59 WICKLOW DRIVE  
 City HILTON HEAD ISLAND State SC Zip Code 29928-3354  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GENERAL MOTORS Occupation AUTOMOTIVE EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05153**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. MARVIN QUIAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15 PINEHILL WAY  
 City MONTEREY State CA Zip Code 93940-4107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05154**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	601.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1823 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FORRESTER A. QUICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12 STEBBINS DRIVE  
 City WINTER HAVEN State FL Zip Code 33884-2725  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05155**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. JOHN B. QUINLAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 86 ORION ROAD  
 City BERKELEY HEIGHTS State NJ Zip Code 07922-2624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05156**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. SAMUEL QUINN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 303 E. CHURCH STREET  
 APARTMENT 14  
 City MARTINSVILLE State VA Zip Code 24112-2938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05157**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 1824 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. JOSE QUINONES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6304 N. OCEAN BLVD.  
 City State Zip Code  
 OCEAN RIDGE FL 33435-5214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05158**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. JOHN R. QUIRING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2306 E. 12TH ROAD  
 City State Zip Code  
 HAMPTON NE 68843-2304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05159**  
 Amount of Each Receipt this Period  
 225.00

**C. MS MILA QUIRING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 CLAY CIRCLE  
 City State Zip Code  
 NEW ULM MN 56073-2015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED FINANCIAL ADVISOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05160**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 575.00  
**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 1825 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. G. KIRK RAAB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 518 CRESTA VISTA LANE  
 City PORTOLA VALLEY State CA Zip Code 94028-7729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI05161**  
 Amount of Each Receipt this Period  
 5000.00

**B. MR. WILLIAM A. RAATHS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1234 LAKESHORE DR  
 City MENASHA State WI Zip Code 54952-1322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GREAT NORTHERN CORP Occupation C.O.B  
 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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05162**  
 Amount of Each Receipt this Period  
 100.00

**C. JULEE S. RACHELS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1003 CHATEAU CT.  
 City LONGVIEW State TX Zip Code 75604-6232  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05163**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1826 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES RADCLIFFE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 PASSAIC AVENUE  
 SUITE 220  
 City State Zip Code  
 FAIRFIELD NJ 07004-3508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DENTISTRY TODAY PUBLISHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 551.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05164**  
 Amount of Each Receipt this Period  
 276.00

**B. DR. ELLEN RADO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 56 MARY LYNN LANE  
 City State Zip Code  
 BRANCBURG NJ 08876-3616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED DENTIST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 501.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05165**  
 Amount of Each Receipt this Period  
 251.00

**C. DR. SORAH TOLOYAN RAHIMI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 CEDAR MARSH RETREAT  
 City State Zip Code  
 SAVANNAH GA 31411-2922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 R.T.R. MEDICAL GROUP PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 330.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05166**  
 Amount of Each Receipt this Period  
 165.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 692.00  
**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 1828 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM A. RAINVILLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2550 HARBOURSIDE DRIVE  
 APARTMENT 351  
 City LONGBOAT KEY State FL Zip Code 34228-4162  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1115.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05170**  
 Amount of Each Receipt this Period  
 220.00

**B. MR. WILLIAM A. RAINVILLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2550 HARBOURSIDE DRIVE  
 APARTMENT 351  
 City LONGBOAT KEY State FL Zip Code 34228-4162  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1115.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05171**  
 Amount of Each Receipt this Period  
 220.00

**C. MR. DAVID R. RALPH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7742 CEDAR CREEK DRIVE  
 City WEST CHESTER State OH Zip Code 45069-1570  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05172**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	640.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1829 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID R. RALPH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7742 CEDAR CREEK DRIVE  
 City WEST CHESTER State OH Zip Code 45069-1570  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05173**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. DONALD N. RALSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 W. BUTTONWOOD STREET  
 City WENONAH State NJ Zip Code 08090-1708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05174**  
 Amount of Each Receipt this Period  
 85.00

**C. MR. BILL RAMSEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 731 PINEVILLE ROAD  
 City CHATTANOOGA State TN Zip Code 37405-2622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RAMSEY TRUCKING, INC. Occupation BUSINESS OWNER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05175**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1086.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1830 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. BILL RAMSEY**

Mailing Address 24264 HEATHERWOOD DRIVE

City SOUTH LYON State MI Zip Code 48178-8015

FEC ID number of contributing federal political committee. **C**

Name of Employer MELVINS HARDWARE Occupation RETAIL SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 28 / 2014**  
**Transaction ID : 2014M04L11AI05176**

Amount of Each Receipt this Period  
**110.00**

Full Name (Last, First, Middle Initial)  
**B. MR. CHARLES L. RAND JR.**

Mailing Address P.O. BOX 7117

City MONROE State LA Zip Code 71211-7117

FEC ID number of contributing federal political committee. **C**

Name of Employer F.B. & D. INDUSTRIES, INC. Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 14 / 2014**  
**Transaction ID : 2014M04L11AI05177**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**C. MS. HELEN P. RAND**

Mailing Address 521 N. BRISTOL AVENUE

City LOS ANGELES State CA Zip Code 90049-2609

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 27 / 2014**  
**Transaction ID : 2014M04L11AI05178**

Amount of Each Receipt this Period  
**375.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **735.00**

**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 1831 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. RICHARD RANDAZZO</b>		Date of Receipt
Mailing Address 2001 BALMORAL PLACE		<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
WILMINGTON	NC	28405-6212
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI05179</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MRS. REBECCA O. RANGEL</b>		Date of Receipt
Mailing Address 378 PALOS VERDES BLVD. APARTMENT A.		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
REDONDO BEACH	CA	90277-6338
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI05180</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="35.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="230.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. ERNEST D. RANKIN</b>		Date of Receipt
Mailing Address 906 E. ROBINSON STREET		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
KNOXVILLE	IA	50138-1905
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI05181</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="735.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1832 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. VICTOR J. RAPOZA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 84-1190 ALAHELE STREET  
 City WAIANAE State HI Zip Code 96792-4624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FIREFIGHTER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05182**  
 Amount of Each Receipt this Period 101.00

**B. MR. VICTOR J. RAPOZA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 84-1190 ALAHELE STREET  
 City WAIANAE State HI Zip Code 96792-4624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FIREFIGHTER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05183**  
 Amount of Each Receipt this Period 100.00

**C. MRS. JUDITH A. RATAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1818 KATHY LANE  
 City MIAMISBURG State OH Zip Code 45342-2628  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation DIRECT SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05184**  
 Amount of Each Receipt this Period 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 321.00  
**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 1833 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. JUDITH A. RATAY</b>		Date of Receipt 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI05185</b>
Mailing Address 1818 KATHY LANE		Amount of Each Receipt this Period 500.00
City MIAMISBURG	State OH	Zip Code 45342-2628
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation DIRECT SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. JUDITH A. RATAY</b>		Date of Receipt 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI05186</b>
Mailing Address 1818 KATHY LANE		Amount of Each Receipt this Period 250.00
City MIAMISBURG	State OH	Zip Code 45342-2628
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation DIRECT SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	

Full Name (Last, First, Middle Initial) <b>C. MR. EUGENE RAUB</b>		Date of Receipt 03 / 04 / 2014 <b>Transaction ID : 2014M04L11AI05187</b>
Mailing Address 50 WATSON CIRCLE		Amount of Each Receipt this Period 35.00
City MONTGOMERY	State AL	Zip Code 36109-4114
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	785.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1834 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EUGENE RAUB**  
Full Name (Last, First, Middle Initial)

Mailing Address 50 WATSON CIRCLE

City MONTGOMERY State AL Zip Code 36109-4114

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05188**

Amount of Each Receipt this Period  
 25.00

**B. MR. EUGENE RAUB**  
Full Name (Last, First, Middle Initial)

Mailing Address 50 WATSON CIRCLE

City MONTGOMERY State AL Zip Code 36109-4114

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05189**

Amount of Each Receipt this Period  
 55.00

**C. MR. EUGENE RAUB**  
Full Name (Last, First, Middle Initial)

Mailing Address 50 WATSON CIRCLE

City MONTGOMERY State AL Zip Code 36109-4114

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05190**

Amount of Each Receipt this Period  
 15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 95.00

**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 1835 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EUGENE RAUB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 WATSON CIRCLE  
 City MONTGOMERY State AL Zip Code 36109-4114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05191**  
 Amount of Each Receipt this Period  
 150.00

**B. MR. EUGENE RAUB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 WATSON CIRCLE  
 City MONTGOMERY State AL Zip Code 36109-4114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05192**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. EUGENE RAUB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 50 WATSON CIRCLE  
 City MONTGOMERY State AL Zip Code 36109-4114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05193**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 390.00  
**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 1836 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. EUGENE RAUB**

Mailing Address 50 WATSON CIRCLE

City MONTGOMERY State AL Zip Code 36109-4114

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI05194**

Amount of Each Receipt this Period  
**60.00**

Full Name (Last, First, Middle Initial)  
**B. MS. SHERRY RAVENNA**

Mailing Address 15 COLLINS MILLS COURT

City SIMPSONVILLE State SC Zip Code 29681-8128

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2014**  
**Transaction ID : 2014M04L11AI05195**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. MS. SHERRY RAVENNA**

Mailing Address 15 COLLINS MILLS COURT

City SIMPSONVILLE State SC Zip Code 29681-8128

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI05196**

Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>210.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1837 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DAVID RAVETTA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1130 SW CHAPMAN WAY APT 509

City PALM CITY	State FL	Zip Code 34990-2471
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05197**

Amount of Each Receipt this Period  
 250.00

**B. MR. ROGER RAWLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1062 W. PLATINUM STREET

City BUTTE	State MT	Zip Code 59701-2222
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05198**

Amount of Each Receipt this Period  
 500.00

**C. MR. JOHN H. RAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 307 YOAKUM PARKWAY  
 APARTMENT 212

City ALEXANDRIA	State VA	Zip Code 22304-4003
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1115.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05199**

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1838 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRIAN J. RAYMENT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6905 E. 65TH STREET  
 City TULSA State OK Zip Code 74133-4022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer K.R.F. Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05200**  
 Amount of Each Receipt this Period 250.00

**B. MR. JACK E. RAYNOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 DUMAS AVENUE UNIT 6  
 City HAMPTON State NH Zip Code 03842-3647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05201**  
 Amount of Each Receipt this Period 200.00

**C. MR. JACK E. RAYNOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 DUMAS AVENUE UNIT 6  
 City HAMPTON State NH Zip Code 03842-3647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05202**  
 Amount of Each Receipt this Period 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 451.00  
**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 1839 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WESLEY H. RAYNOR**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 82

City MEXICO State ME Zip Code 04257-0082

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05203**

Amount of Each Receipt this Period  
 101.00

**B. DR. LAUREN REAGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 13040 RIVERS ROAD

City LOS ANGELES State CA Zip Code 90049-1800

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05204**

Amount of Each Receipt this Period  
 201.00

**C. MS. VICTORIA M. REAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 1150 8TH AVENUE S.W.  
APARTMENT 103

City LARGO State FL Zip Code 33770-3174

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05205**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 352.00

**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 1840 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. VICTORIA M. REAM**

Mailing Address 1150 8TH AVENUE S.W.  
APARTMENT 103

City LARGO State FL Zip Code 33770-3174

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05206**

Amount of Each Receipt this Period  
51.00

Full Name (Last, First, Middle Initial)  
**B. MR. SHERIDAN EDWARD REAVER JR.**

Mailing Address 15050 SIXES ROAD

City EMMITSBURG State MD Zip Code 21727-7810

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CORPORATE EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05207**

Amount of Each Receipt this Period  
150.00

Full Name (Last, First, Middle Initial)  
**C. MR. ANDREW JOSEPH RECK**

Mailing Address 6125 PATTON STREET

City NEW ORLEANS State LA Zip Code 70118-5832

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
326.00

Date of Receipt  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05208**

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 216.00

**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 1841 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ANDREW JOSEPH RECK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6125 PATTON STREET  
 City NEW ORLEANS State LA Zip Code 70118-5832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 326.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05209**  
 Amount of Each Receipt this Period  
 15.00

**B. MR. ANDREW JOSEPH RECK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6125 PATTON STREET  
 City NEW ORLEANS State LA Zip Code 70118-5832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 326.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05210**  
 Amount of Each Receipt this Period  
 35.00

**C. MR. ANDREW JOSEPH RECK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6125 PATTON STREET  
 City NEW ORLEANS State LA Zip Code 70118-5832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 326.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05211**  
 Amount of Each Receipt this Period  
 15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	65.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1842 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. ANDREW JOSEPH RECK</b>		Date of Receipt 03 / 20 / 2014 <b>Transaction ID : 2014M04L11AI05212</b>
Mailing Address 6125 PATTON STREET		Amount of Each Receipt this Period 55.00
City NEW ORLEANS	State LA	Zip Code 70118-5832
FEC ID number of contributing federal political committee. C	Name of Employer RETIRED	
Occupation RETIRED		Aggregate Year-to-Date 326.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. ANDREW JOSEPH RECK</b>		Date of Receipt 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI05213</b>
Mailing Address 6125 PATTON STREET		Amount of Each Receipt this Period 15.00
City NEW ORLEANS	State LA	Zip Code 70118-5832
FEC ID number of contributing federal political committee. C	Name of Employer RETIRED	
Occupation RETIRED		Aggregate Year-to-Date 326.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. ANDREW JOSEPH RECK</b>		Date of Receipt 03 / 28 / 2014 <b>Transaction ID : 2014M04L11AI05214</b>
Mailing Address 6125 PATTON STREET		Amount of Each Receipt this Period 16.00
City NEW ORLEANS	State LA	Zip Code 70118-5832
FEC ID number of contributing federal political committee. C	Name of Employer RETIRED	
Occupation RETIRED		Aggregate Year-to-Date 326.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	86.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1843 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. V. W. REDMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2811 CARMEL STREET  
 City DENTON State TX Zip Code 76205-8311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05215**  
 Amount of Each Receipt this Period  
 200.00

**B. LAWRENCE A. REED**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 64 BRIARCLIFF  
 City SAINT LOUIS State MO Zip Code 63124-1765  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PACE PROPERTIES Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05216**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. ROBERT E. REED**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 189 EMBASSY COURT  
 City MARTINSBURG State WV Zip Code 25405-4009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer US DEPT OF THE TREASURY Occupation IT SPECIALIST  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05217**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1844 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENNETH R. REES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2261 DEBORAH LANE  
 City EDMOND State OK Zip Code 73034-3065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05218**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. ROBERT M. REEVE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 KAILUANA PLACE  
 City KAILUA State HI Zip Code 96734-1661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05219**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. ROBERT M. REEVE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 KAILUANA PLACE  
 City KAILUA State HI Zip Code 96734-1661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05220**  
 Amount of Each Receipt this Period  
 51.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1101.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1845 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DANIEL E. REEVES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 785 W. CONWAY DRIVE NW  
 City ATLANTA State GA Zip Code 30327-3633  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05221**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. ROSALYN REGAL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3000 S. OCEAN BLVD.  
 City PALM BEACH State FL Zip Code 33480-6616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05221**  
 Amount of Each Receipt this Period  
 110.00

**C. MR. PATRICK REGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1321 SOUTHVIEW DRIVE  
 City HASTINGS State MN Zip Code 55033-3439  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05223**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 910.00  
**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 1846 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WALTER J. REGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8599 DERRY DRIVE  
 City JACKSONVILLE State FL Zip Code 32244-7119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05224**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. WALTER J. REGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8599 DERRY DRIVE  
 City JACKSONVILLE State FL Zip Code 32244-7119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05225**  
 Amount of Each Receipt this Period  
 220.00

**C. MR. CLIFFORD J. REGLINSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 172 SANDRA DRIVE  
 City EAST HARTFORD State CT Zip Code 06118-1947  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05226**  
 Amount of Each Receipt this Period  
 201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	671.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1847 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PETER J. REGNA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 117 W. LAKE ROAD  
 City TUXEDO PARK State NY Zip Code 10987-3914  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05227**  
 Amount of Each Receipt this Period  
 120.00

**B. MS. CATHERINE J. REGULA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19206 STONE BROOK  
 City CHAPEL HILL State NC Zip Code 27517-8349  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 620.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05228**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. ERICK A. REICKERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3100 S. OCEAN BLVD. PH 601S  
 City PALM BEACH State FL Zip Code 33480-7019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05229**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 340.00  
**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 1848 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DALE REID**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5715 COMMUNITY DRIVE  
 City HOUSTON State TX Zip Code 77005-1917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EXXONMOBIL CORPORATION Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05230**  
 Amount of Each Receipt this Period  
 256.00

**B. MR. PAUL D. REID**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 HARDING AVENUE  
 City LOCKPORT State NY Zip Code 14094-6020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REID GROUP Occupation C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05231**  
 Amount of Each Receipt this Period  
 110.00

**C. MS. LEANNA L. REIDY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1214 AUGUSTA DRIVE  
 City HOUSTON State TX Zip Code 77057-2212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05232**  
 Amount of Each Receipt this Period  
 125.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	491.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1849 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. LEANNA L. REIDY**  
Full Name (Last, First, Middle Initial)

Mailing Address 1214 AUGUSTA DRIVE

City HOUSTON State TX Zip Code 77057-2212

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05233**

Amount of Each Receipt this Period  
 1.00

**B. MR. JOHN E. REILLY**  
Full Name (Last, First, Middle Initial)

Mailing Address 142 HIBISCUS DRIVE

City PUNTA GORDA State FL Zip Code 33950-5036

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05234**

Amount of Each Receipt this Period  
 120.00

**C. MR. JOHN E. REILLY**  
Full Name (Last, First, Middle Initial)

Mailing Address 142 HIBISCUS DRIVE

City PUNTA GORDA State FL Zip Code 33950-5036

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05235**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	221.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1850 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PHILIP REILLY**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1991

City RANCHO SANTA FE State CA Zip Code 92067-1991

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05236**

Amount of Each Receipt this Period  
 1000.00

**B. JOSEPH REILLY, JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 20235 N. SUNDANCE WAY

City SURPRISE State AZ Zip Code 85374-4913

FEC ID number of contributing federal political committee. **C**

Name of Employer PAYROLL CONTROL SYSTEM, INC. Occupation FOUNDRING PARTNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05237**

Amount of Each Receipt this Period  
 200.00

**C. MR. ROBERT D. REILY**  
Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 60296

City NEW ORLEANS State LA Zip Code 70160-0296

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05238**

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1851 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BEBE A. REIMER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1105 N.W. BECONTREE DRIVE  
 City LAWTON State OK Zip Code 73505-4001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05239**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. MAC EASON REIN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6850 MURRAY LANE  
 City ANNANDALE State VA Zip Code 22003-1974  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE REIN COMPANY, INC. Occupation TREASURER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05240**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. WERNER REINARTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1710  
 City BETHLEHEM State PA Zip Code 18016-1710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REYNOLDS & REYNOLDS ELECTRONICS, IN Occupation SALES & MARKETING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05241**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1852 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GENE E. REINBOLT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2805 VESTA CIRCLE  
 City IDAHO FALLS State ID Zip Code 83402-5589  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI05242**  
 Amount of Each Receipt this Period 100.00

**B. MR. RONALD REINHARDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23550 COUNTY ROAD 10  
 City LA JARA State CO Zip Code 81140-9008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI05243**  
 Amount of Each Receipt this Period 500.00

**C. MR. HOWARD E. REINHEIMER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 340 S. PALM AVENUE UNIT 102  
 City SARASOTA State FL Zip Code 34236-6795  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05244**  
 Amount of Each Receipt this Period 2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1853 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HOWARD REINSCH**  
Full Name (Last, First, Middle Initial)

Mailing Address 522 4TH STREET  
SUITE 200

City SIOUX CITY State IA Zip Code 51101-1620

FEC ID number of contributing federal political committee. **C**

Name of Employer KING, REINSCH, PROSSER Occupation ACCOUNTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05245**

Amount of Each Receipt this Period  
500.00

**B. MR. CHARLES M. REISER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4 JOHNSTON AVE

City NORTHPORT State NY Zip Code 11768-2908

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05246**

Amount of Each Receipt this Period  
100.00

**C. DR. STEPHEN G. REMINE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1385 FOUR LEAF LANE

City HOLLIDAYSBURG State PA Zip Code 16648-2510

FEC ID number of contributing federal political committee. **C**

Name of Employer PROVIDENCE HOSPITAL Occupation PHYSICIAN/ADMINISTRATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05247**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00

**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 1854 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. ANNA G. RENCHKOVSKAYA**

Mailing Address 701 FAIRGROUNDS DRIVE #308

City State Zip Code  
SACRAMENTO CA 95817-2442

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
277.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05248**

Amount of Each Receipt this Period  
35.00

Full Name (Last, First, Middle Initial)  
**B. MRS. ANNA G. RENCHKOVSKAYA**

Mailing Address 701 FAIRGROUNDS DRIVE #308

City State Zip Code  
SACRAMENTO CA 95817-2442

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
277.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05249**

Amount of Each Receipt this Period  
35.00

Full Name (Last, First, Middle Initial)  
**C. MRS. ANNA G. RENCHKOVSKAYA**

Mailing Address 701 FAIRGROUNDS DRIVE #308

City State Zip Code  
SACRAMENTO CA 95817-2442

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
277.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05250**

Amount of Each Receipt this Period  
37.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 107.00

**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 1855 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LONNIE C. RENFROE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 798 LIGHTHOUSE AVENUE  
 BOX 318  
 City MONTEREY State CA Zip Code 93940-1010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RENTAL PROPERTY OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05251**  
 Amount of Each Receipt this Period  
 200.00

**B. MS. AGNES SARNA RENNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6746 WENDY JEAN DRIVE  
 City MORROW State GA Zip Code 30260-3124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05252**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. DONALD L. RENNIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 601 VILLAGE WAY  
 APARTMENT 50  
 City WALLA WALLA State WA Zip Code 99362-8603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05253**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	510.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1856 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DONALD L. RENNIE**

Mailing Address 601 VILLAGE WAY  
APARTMENT 50

City WALLA WALLA State WA Zip Code 99362-8603

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05254**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**B. MR. DONALD L. RENNIE**

Mailing Address 601 VILLAGE WAY  
APARTMENT 50

City WALLA WALLA State WA Zip Code 99362-8603

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05255**

Amount of Each Receipt this Period  
110.00

Full Name (Last, First, Middle Initial)  
**C. MR. STEPHEN LOUIS RETHERFORD**

Mailing Address 51239 PLYMOUTH LAKE CIRCLE

City PLYMOUTH State MI Zip Code 48170-6399

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05256**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 211.00

**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 1857 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. STEPHEN LOUIS RETHERFORD**

Mailing Address 51239 PLYMOUTH LAKE CIRCLE

City PLYMOUTH	State MI	Zip Code 48170-6399
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05257**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**B. MR. RICHARD K. REULING**

Mailing Address 1971 W. VIA DEL PICAMADEROS

City GREEN VALLEY	State AZ	Zip Code 85622-5413
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05258**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. MS. ALICE REYES**

Mailing Address 13516 DUTCH MYRTLE

City SAN ANTONIO	State TX	Zip Code 78232-4822
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05259**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2120.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1858 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. MIKE V. REYES**

Mailing Address 701 N. SAINT MARYS STREET  
APARTMENT 14

City SAN ANTONIO State TX Zip Code 78205-1336

FEC ID number of contributing federal political committee. **C**

Name of Employer THE FOUR R RANCH Occupation REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05260**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. MS. ELIZABETH REYNOLDS**

Mailing Address 3590 WARSCHUN ROAD

City AUBREY State TX Zip Code 76227-4082

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05261**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. MS. FRANCES L. REYNOLDS**

Mailing Address 235 HERON POINT

City CHESTERTOWN State MD Zip Code 21620-1676

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05262**

Amount of Each Receipt this Period  
201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 951.00

**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 1859 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JOHNNIE REYNOLDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 161  
 City QUITMAN State MS Zip Code 39355-0161  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05263**  
 Amount of Each Receipt this Period  
 201.00

**B. MR. JOSEPH W. REYNOLDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9849 E. IDA CIRCLE  
 City GREENWOOD VILLAGE State CO Zip Code 80111-3750  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05264**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. MARK REYNOLDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 766 MIKE PARRA ROAD  
 City COLUMBUS State MS Zip Code 39705-8359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05265**  
 Amount of Each Receipt this Period  
 55.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	356.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1860 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. DR. MICHAEL REZNIKOV</b>		Date of Receipt 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI05266</b>
Mailing Address 3020 S. KERCKHOFF AVE.		Amount of Each Receipt this Period 150.00
City SAN PEDRO	State CA	Zip Code 90731-6741
FEC ID number of contributing federal political committee. C		
Name of Employer PHYSICAL OPTICS CORP.	Occupation SCIENTIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. MR. LLOYD V. RHINHART</b>		Date of Receipt 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI05267</b>
Mailing Address P.O. BOX 658		Amount of Each Receipt this Period 110.00
City PILOT ROCK	State OR	Zip Code 97868-0658
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) <b>C. MR. RALPH S. RHOADES</b>		Date of Receipt 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI05268</b>
Mailing Address 6231 S. HUDSON AVENUE		Amount of Each Receipt this Period 180.00
City TULSA	State OK	Zip Code 74136-2023
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1170.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	440.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1861 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JAY RHOADS**

Mailing Address 1540 OAK HARBOR BLVD.

City State Zip Code  
VERO BEACH FL 32967-7324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05269**

Amount of Each Receipt this Period  
220.00

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT J. RICARD**

Mailing Address 231 INVERNESS PLACE

City State Zip Code  
GLENDORA CA 91741-3940

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
252.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05270**

Amount of Each Receipt this Period  
152.00

Full Name (Last, First, Middle Initial)  
**C. MR. ANTHONY RICCARDI**

Mailing Address 955 W. JAMES COURT S.

City State Zip Code  
LAKE FOREST IL 60045-4623

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED BUSINESS OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05271**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 622.00

**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 1862 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ANDREA LYNNE RICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7200 CAPILLA COURT  
 City CORAL GABLES State FL Zip Code 33143-6113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05272**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. BETTY M. RICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1110 ANTELOPE PLACE  
 City NEWBURY PARK State CA Zip Code 91320-5804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05273**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. CHRISTIAN RICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 551 MIDWAY CIRCLE  
 City BRENTWOOD State TN Zip Code 37027-5178  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOEYD Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05274**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1863 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DAVID R. RICE**

Mailing Address 800 CENTER PLACE

City VIDALIA      State GA      Zip Code 30474-9315

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED      Occupation OWNER/V.P.O.

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05275**

Amount of Each Receipt this Period  
110.00

Full Name (Last, First, Middle Initial)  
**B. MR. EARL A. RICE**

Mailing Address 659 W. MAIN STREET

City EMMITSBURG      State MD      Zip Code 21727-9153

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI05276**

Amount of Each Receipt this Period  
55.00

Full Name (Last, First, Middle Initial)  
**C. MR. EARL A. RICE**

Mailing Address 659 W. MAIN STREET

City EMMITSBURG      State MD      Zip Code 21727-9153

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
226.00

Date of Receipt  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05277**

Amount of Each Receipt this Period  
36.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 201.00

**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 1864 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. L. D. RICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 146 MOUNTAIN LAUREL COURT  
 City FREDERICKSBURG State VA Zip Code 22406-4058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05278**  
 Amount of Each Receipt this Period  
 56.00

**B. MS. PATRICIA C. RICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3922 ANTIGUA DRIVE  
 City DALLAS State TX Zip Code 75244-6605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05279**  
 Amount of Each Receipt this Period  
 111.00

**C. MR. RALPH C. RICE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2410 MEMORIAL DRIVE APARTMENT C119  
 City BRYAN State TX Zip Code 77802-2865  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05280**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1167.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1865 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. BETTY RICH**

Mailing Address 30 E. DEERPATH ROAD

City LAKE FOREST      State IL      Zip Code 60045-2107

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05281**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. MR. JOHN C. RICH**

Mailing Address 1607 NARCISA COURT N.W.

City LOS RANCHOS      State NM      Zip Code 87107-7100

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05282**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**C. MR. JOSEPH W. RICH**

Mailing Address 18 EASTFIELD DRIVE

City ROLLING HILLS      State CA      Zip Code 90274-5261

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED      Occupation REAL ESTATE

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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05283**

Amount of Each Receipt this Period  
750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1170.00

**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 1866 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. WILLIS A. RICH**

Mailing Address 5859 WILD FIG LANE

City State Zip Code  
FORT MYERS FL 33919-3452

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05284**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. WILLIS A. RICH**

Mailing Address 5859 WILD FIG LANE

City State Zip Code  
FORT MYERS FL 33919-3452

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05285**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MR. DONALD RICHARD**

Mailing Address 14545 QUAIL RUN

City State Zip Code  
CLAREMORE OK 74017-4632

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05286**

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1867 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD C. RICHARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 16442 E. DESERT SAGE DRIVE

City FOUNTAIN HILLS	State AZ	Zip Code 85268-4414
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2014

**Transaction ID : 2014M04L11AI05287**

Amount of Each Receipt this Period  
500.00

**B. MRS. GREYNELL RICHARD**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2195

City RANCHO SANTA FE	State CA	Zip Code 92067-2195
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
730.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI05288**

Amount of Each Receipt this Period  
100.00

**C. MRS. CAROL H. RICHARDS**  
Full Name (Last, First, Middle Initial)

Mailing Address 3 PURSUIT #17A

City ALISO VIEJO	State CA	Zip Code 92656-4213
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
601.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : 2014M04L11AI05289**

Amount of Each Receipt this Period  
501.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1101.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1868 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DANIEL RICHARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2117 CAMELIA CIRCLE  
 City MIDLOTHIAN State VA Zip Code 23112-4184  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05290**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. DANIEL RICHARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2117 CAMELIA CIRCLE  
 City MIDLOTHIAN State VA Zip Code 23112-4184  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI05291**  
 Amount of Each Receipt this Period  
 101.00

**C. MS. LAURA B. RICHARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 102 BOULDER ROAD  
 City MANHASSET State NY Zip Code 11030-1632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05292**  
 Amount of Each Receipt this Period  
 125.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 326.00  
**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 1869 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. LAURA B. RICHARDS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 102 BOULDER ROAD  
 City MANHASSET State NY Zip Code 11030-1632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05293**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. CLYDE J. RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 TRIANO CIRCLE  
 City VENICE State FL Zip Code 34292-6450  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WEGMANN U.S.A. Occupation MARKETING DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05294**  
 Amount of Each Receipt this Period  
 500.00

**C. DR. DONALD EDWARD RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 74094 MILITARY ROAD  
 City COVINGTON State LA Zip Code 70435-6021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SOUTHERN PAIN & NEUROLOGICAL CONSU Occupation NEUROSURGEON  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05295**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	710.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1870 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ERNEST R. RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 206 SAINT MATTHEW DRIVE  
 City CHURCH POINT State LA Zip Code 70525-5741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05296**  
 Amount of Each Receipt this Period  
 55.00

**B. MR. ERNEST R. RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 206 SAINT MATTHEW DRIVE  
 City CHURCH POINT State LA Zip Code 70525-5741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05297**  
 Amount of Each Receipt this Period  
 110.00

**C. MR. ERNEST R. RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 206 SAINT MATTHEW DRIVE  
 City CHURCH POINT State LA Zip Code 70525-5741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05298**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 215.00  
**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 1871 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANK E. RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 E. 72ND STREET  
 City NEW YORK State NY Zip Code 10021-4145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer F.E. RICHARDSON & CO., INC. Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **32400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05299**  
 Amount of Each Receipt this Period  
**32400.00**

**B. MR. FRED RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 401 E. LINTON BLVD. APARTMENT 263  
 City DELRAY BEACH State FL Zip Code 33483-5083  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05300**  
 Amount of Each Receipt this Period  
**1000.00**

**C. GUY RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11216 TAMIAMI TRAIL N, #146  
 City NAPLES State FL Zip Code 34110-1640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation PHOTOGRAPHER  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05301**  
 Amount of Each Receipt this Period  
**300.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>33700.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1872 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PHYLLIS P. RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 767 E. PARKCENTER BLVD.  
 APARTMENT 144  
 City BOISE State ID Zip Code 83706-6533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 356.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05302**  
 Amount of Each Receipt this Period 45.00

**B. MRS. PHYLLIS P. RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 767 E. PARKCENTER BLVD.  
 APARTMENT 144  
 City BOISE State ID Zip Code 83706-6533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 356.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI05303**  
 Amount of Each Receipt this Period 51.00

**C. MRS. PHYLLIS P. RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 767 E. PARKCENTER BLVD.  
 APARTMENT 144  
 City BOISE State ID Zip Code 83706-6533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 356.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05304**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 146.00  
**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 1873 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PHYLLIS P. RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 767 E. PARKCENTER BLVD.  
 APARTMENT 144  
 City BOISE State ID Zip Code 83706-6533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 356.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05305**  
 Amount of Each Receipt this Period 45.00

**B. MR. ROBERT RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 54969 WOODHOLD COURT  
 City ELKHART State IN Zip Code 46516-6511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05306**  
 Amount of Each Receipt this Period 250.00

**C. MR. ROBERT G. RICHARDSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4300 TIMBECREST LANE  
 City WACO State TX Zip Code 76705-3552  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation AGRICULTURE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05307**  
 Amount of Each Receipt this Period 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 405.00  
**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 1874 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. SIDNEY H. RICHARDSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2005 N. HOOVER AVENUE

City CAMERON State TX Zip Code 76520-2148

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05308**

Amount of Each Receipt this Period  
 75.00

**B. MR. DONALD RICHTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 8578 EDGEWARE WAY

City ELK GROVE State CA Zip Code 95758-6783

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05309**

Amount of Each Receipt this Period  
 111.00

**C. MRS. JANET RICHTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 26 VAUTRIN AVENUE

City HOLTSVILLE State NY Zip Code 11742-1624

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 316.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05310**

Amount of Each Receipt this Period  
 36.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 222.00

**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 1875 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JANET RICHTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 26 VAUTRIN AVENUE

City State Zip Code  
HOLTSVILLE NY 11742-1624

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
316.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05311**

Amount of Each Receipt this Period  
220.00

**B. MS. DOROTHY J. RICKARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 472 HARPER STREET

City State Zip Code  
WINSTON SALEM NC 27104-3850

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
430.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05312**

Amount of Each Receipt this Period  
190.00

**C. MRS. LUCIE RIEDERER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2208 INVERNESS WAY

City State Zip Code  
COUPEVILLE WA 98239-9690

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PEACE HEALTH ST. JOSEPH MEDICAL CENT PHYSICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05313**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 460.00

**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 1876 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FREDERIC A. RIEHL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 893  
 City QUEECHEE State VT Zip Code 05059-0893  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05314**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. WILLIAM A. RIEHL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17 ARGYLE ROAD  
 City RYE BROOK State NY Zip Code 10573-2133  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE WARJAM GROUP LTD. Occupation CONSTRUCTION MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05315**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. THOMAS C. RIGGIO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1432 SIEBERT CT.  
 City NAPERVILLE State IL Zip Code 60565-6783  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INNER SECURITY SYSTEMS, INC. Occupation C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05316**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 1877 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LOUIS V. RIGGS**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2800-393

City CAREFREE State AZ Zip Code 85377

FEC ID number of contributing federal political committee. **C**

Name of Employer TEICHERT, INC. Occupation BOARD MEMBER CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05317**

Amount of Each Receipt this Period  
 2500.00

**B. MS. RAMONA S. RIGGS**  
Full Name (Last, First, Middle Initial)

Mailing Address 4920 GARDNER LANE

City SUFFOLK State VA Zip Code 23434-7072

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05318**

Amount of Each Receipt this Period  
 440.00

**C. MR. JOHN P. RIGLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 313 N. LINN AVENUE

City NEW HAMPTON State IA Zip Code 50659-1229

FEC ID number of contributing federal political committee. **C**

Name of Employer SECURITY BANK Occupation BUSINESSMAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05319**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3190.00

**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 1878 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ELIZABETH RIGNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5531 SUGAR HILL  
 City HOUSTON State TX Zip Code 77056-2031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VOLUNTEER Occupation VOLUNTEER  
 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  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05320**  
 Amount of Each Receipt this Period  
 150.00

**B. MRS. ELIZABETH RIGNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5531 SUGAR HILL  
 City HOUSTON State TX Zip Code 77056-2031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VOLUNTEER Occupation VOLUNTEER  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05321**  
 Amount of Each Receipt this Period  
 150.00

**C. MR. THOMAS A. RIGSBY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3725 BROOKHOLLOW DRIVE  
 City ABILENE State TX Zip Code 79605-6445  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ADVERTISING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05322**  
 Amount of Each Receipt this Period  
 65.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 365.00  
**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 1879 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. WILLIAM RIKER**

Mailing Address 5413 OAK CHASE DRIVE

City State Zip Code  
ANTIOCH TN 37013-4250

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
D.H.S. TRANSPORTATION SECURITY INSPECTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05323**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. MICHAEL LEE RILEE**

Mailing Address 2624 BASTIAN LANE

City State Zip Code  
HERNDON VA 20171-2459

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RILEE SYSTEMS TECHNOLOGIES LLC AEROSPACE RESEARCH

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05324**

Amount of Each Receipt this Period  
1500.00

Full Name (Last, First, Middle Initial)  
**C. MR. DAVID B. RING**

Mailing Address 1489 CENTRE STREET

City State Zip Code  
NEWTON HIGHLANDS MA 02461-1200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
APPLIED PLASTICS CO., INC. REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05325**

Amount of Each Receipt this Period  
550.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2150.00

**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 1880 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENNETH R. RINGBLOOM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 760 N. FRONTAGE ROAD  
 SUITE 101  
 City WILLOWBROOK State IL Zip Code 60527-5656  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05326**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. JIM RINKENBERGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2637 BULRUSH LANE  
 City NAPLES State FL Zip Code 34105-3026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05327**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. GARY A. RISCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2695 HILLMAN FORD ROAD  
 City MORRAL State OH Zip Code 43337-9300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05328**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1881 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. GARY A. RISCH**

Mailing Address 2695 HILLMAN FORD ROAD

City MORRAL                      State OH                      Zip Code 43337-9300

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED                      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05329**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT L. RISLEY**

Mailing Address P.O. BOX 5557

City BRADENTON                      State FL                      Zip Code 34281-5557

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED                      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05330**

Amount of Each Receipt this Period  
121.00

Full Name (Last, First, Middle Initial)  
**C. MR. DAVID A. RISMILLER**

Mailing Address 4021 GULF SHORE BLVD. N.  
THE BRITTANY 1006

City NAPLES                      State FL                      Zip Code 34103-3471

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED                      Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05331**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 622.00

**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 1882 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CLAUDE J. RITCHOT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19436 FOXDALE CIRCLE  
 City HUNTINGTON BEACH State CA Zip Code 92648-6614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RIVERTON STEELE CONSTRUCTION Occupation C. E. O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 531.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05332**  
 Amount of Each Receipt this Period  
 331.00

**B. MS. KATHALEEN E. RITENHOUR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 926 HIGHLAND DRIVE  
 City VISTA State CA Zip Code 92083-3308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PRIVATE SECURITY Occupation GUARD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 296.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05333**  
 Amount of Each Receipt this Period  
 10.00

**C. MS. KATHALEEN E. RITENHOUR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 926 HIGHLAND DRIVE  
 City VISTA State CA Zip Code 92083-3308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PRIVATE SECURITY Occupation GUARD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 296.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05334**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 391.00  
**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 1884 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. DAVID LLOYD RITTENHOUSE</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2014 <b>Transaction ID : 2014M04L11AI05338</b>
Mailing Address 5008 N.E. DEARBORN AVENUE		Amount of Each Receipt this Period 1.50
City LAWTON	State OK	Zip Code 73507-7348
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 406.00	

Full Name (Last, First, Middle Initial) <b>B. MR. DAVID LLOYD RITTENHOUSE</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2014 <b>Transaction ID : 2014M04L11AI05339</b>
Mailing Address 5008 N.E. DEARBORN AVENUE		Amount of Each Receipt this Period 403.50
City LAWTON	State OK	Zip Code 73507-7348
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 406.00	

Full Name (Last, First, Middle Initial) <b>C. MR. DAVID LLOYD RITTENHOUSE</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI05340</b>
Mailing Address 5008 N.E. DEARBORN AVENUE		Amount of Each Receipt this Period 1.00
City LAWTON	State OK	Zip Code 73507-7348
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 406.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	406.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1885 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. HELEN H. RITZ</b>		Date of Receipt
Mailing Address 6393 S. JERICO WAY		M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014
City	State	Zip Code
CENTENNIAL	CO	80016-1285
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI05341</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	450.00	

Full Name (Last, First, Middle Initial) <b>B. MS. HELEN H. RITZ</b>		Date of Receipt
Mailing Address 6393 S. JERICO WAY		M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014
City	State	Zip Code
CENTENNIAL	CO	80016-1285
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI05342</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	450.00	

Full Name (Last, First, Middle Initial) <b>C. MR. ELLIOT RIVIERE</b>		Date of Receipt
Mailing Address 6701 N. SCOTTSDALE ROAD LOT 23		M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014
City	State	Zip Code
SCOTTSDALE	AZ	85250-4404
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI05343</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		101.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	551.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1886 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. GUIRGUIS R. RIZKALLA</b>		Date of Receipt
Mailing Address 3736 VETERAN AVENUE		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code
LOS ANGELES	CA	90034-7013
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI05344</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
SELF-EMPLOYED	TALENT MANAGER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="201.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. GUIRGUIS R. RIZKALLA</b>		Date of Receipt
Mailing Address 3736 VETERAN AVENUE		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
LOS ANGELES	CA	90034-7013
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI05345</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="51.00"/>
Name of Employer	Occupation	
SELF-EMPLOYED	TALENT MANAGER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="201.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MISS DORIS ROACH</b>		Date of Receipt
Mailing Address 316 BEBOUT ROAD		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
VENETIA	PA	15367-1355
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI05346</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="126.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 1887 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MISS DORIS ROACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 316 BEBOUT ROAD  
 City VENETIA State PA Zip Code 15367-1355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05347**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. DOUGLAS M. ROACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 N. ROSEMONT AVENUE  
 City MARTINSBURG State WV Zip Code 25401-2329  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05348**  
 Amount of Each Receipt this Period  
 120.00

**C. MRS. EVELYN ROACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 200353  
 City DENVER State CO Zip Code 80220-0353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 485.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05349**  
 Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	280.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1888 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BARBARA S. S. ROBBINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 462 CROCKER SPERRY DRIVE  
 City SANTA BARBARA State CA Zip Code 93108-2213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05350**  
 Amount of Each Receipt this Period 100.00

**B. MR. JEFFREY P. ROBERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 265 MILL STREAM WAY APT. #  
 City WILLIAMSBURG State VA Zip Code 23185-3187  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RENDEZVOUS CONSULTING, INC. Occupation ENERGY CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05351**  
 Amount of Each Receipt this Period 750.00

**C. MR. BOB ROBERTS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10715B 6TH STREET  
 City GILROY State CA Zip Code 95020-9250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05352**  
 Amount of Each Receipt this Period 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	970.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1889 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CALVIN ROBERTS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1237 VICTORY LANE

City KERRVILLE State TX Zip Code 78028-2776

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI05353**

Amount of Each Receipt this Period  
 240.00

**B. MR. DAVID ROBERTS**  
Full Name (Last, First, Middle Initial)

Mailing Address 4653 PINEHURST CIRCLE

City CENTER VALLEY State PA Zip Code 18034-8430

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05354**

Amount of Each Receipt this Period  
 100.00

**C. MRS. DOROTHY B. ROBERTS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1970 LEMON RANCH ROAD

City SANTA BARBARA State CA Zip Code 93108-2257

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1601.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05355**

Amount of Each Receipt this Period  
 550.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 890.00

**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 1890 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DOROTHY B. ROBERTS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1970 LEMON RANCH ROAD  
 City SANTA BARBARA State CA Zip Code 93108-2257  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1601.00**

Date of Receipt: **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI05356**  
 Amount of Each Receipt this Period: **501.00**

**B. MR. JOHN OSBORNE ROBERTS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3017 STILL MEADOW DRIVE  
 City COLLEGEVILLE State PA Zip Code 19426-3247  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **GERMAN AUTO SPECIALISTS** Occupation: **BUSINESS OWNER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **221.00**

Date of Receipt: **03 / 04 / 2014**  
**Transaction ID : 2014M04L11AI05357**  
 Amount of Each Receipt this Period: **120.00**

**C. MR. JOHN OSBORNE ROBERTS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3017 STILL MEADOW DRIVE  
 City COLLEGEVILLE State PA Zip Code 19426-3247  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **GERMAN AUTO SPECIALISTS** Occupation: **BUSINESS OWNER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **221.00**

Date of Receipt: **03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI05358**  
 Amount of Each Receipt this Period: **51.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>672.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1891 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. KAREL D. ROBERTS**

Mailing Address 2111 BUFFALO HEIGHTS DRIVE

City State Zip Code  
GARDEN CITY KS 67846-3512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05359**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. DR. LAURA L. ROBERTS**

Mailing Address 4217 COOLIDGE STREET

City State Zip Code  
MOUNT PLEASANT SC 29466-7161

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MEDICAL UNIVERSITY OF SOUTHE CAROLINA ANESTHESIOLOGIST

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05360**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**C. MS. MARGARET HAROLD ROBERTS**

Mailing Address 1737 WOOD NYMPH TRAIL

City State Zip Code  
LOOKOUT MOUNTAIN GA 30750-2640

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A NONE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05361**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1301.00

**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 1892 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. NANCY ROBERTS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12004 MAPLE PARK DRIVE  
 City FORT SMITH State AR Zip Code 72916-9307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ST. EDWARD MERCY MEDICAL CENTER Occupation MEDICAL DOCTOR  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 27 / 2014**  
**Transaction ID : 2014M04L11AI05362**  
 Amount of Each Receipt this Period **100.00**

**B. MR. NORMAN ROBERTS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 109 RIVERWOOD DRIVE  
 City FRANKLIN State NC Zip Code 28734-1375  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt **03 / 12 / 2014**  
**Transaction ID : 2014M04L11AI05363**  
 Amount of Each Receipt this Period **200.00**

**C. MR. RICHARD D. ROBERTS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1109 S. BAY SHORE DRIVE  
 City VIRGINIA BEACH State VA Zip Code 23451-3807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **995.00**

Date of Receipt **03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI05364**  
 Amount of Each Receipt this Period **495.00**

**SUBTOTAL** of Receipts This Page (optional)..... **795.00**  
**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 1893 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONNY ROBERTS**  
Full Name (Last, First, Middle Initial)

Mailing Address 248 PAINT PONY TRAIL N.

City FORT WORTH State TX Zip Code 76108-4225

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05365**

Amount of Each Receipt this Period  
 50.00

**B. MR. RONNY ROBERTS**  
Full Name (Last, First, Middle Initial)

Mailing Address 248 PAINT PONY TRAIL N.

City FORT WORTH State TX Zip Code 76108-4225

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05366**

Amount of Each Receipt this Period  
 56.00

**C. DR. RICHARD E. ROBICHAUX**  
Full Name (Last, First, Middle Initial)

Mailing Address 3241 WOODLAND RIDGE BLVD.

City BATON ROUGE State LA Zip Code 70816-2744

FEC ID number of contributing federal political committee. **C**

Name of Employer BATON ROUGE ORTHOPEDIC CLINIC Occupation PHYSICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05367**

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1106.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1894 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BEVERLY O. ROBINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 156  
 City PARK HILLS State MO Zip Code 63601-0156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SOM SEISM MOTORS Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI05368**  
 Amount of Each Receipt this Period  
 215.00

**B. MRS. BOBBIE C. ROBINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2952 BOCAGE LAKE COURT  
 City BATON ROUGE State LA Zip Code 70809-1053  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 366.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05369**  
 Amount of Each Receipt this Period  
 116.00

**C. MR. CHARLES H. ROBINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 105 LEAKE AVENUE APARTMENT 87  
 City NASHVILLE State TN Zip Code 37205-3742  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05370**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	431.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1896 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. OLETA E. ROBINSON</b>		Date of Receipt
Mailing Address 1525 CAROL LANE		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City State Zip Code WICHITA FALLS TX 76302-2005		<b>Transaction ID : 2014M04L11AI05374</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="50.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="386.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MRS. OLETA E. ROBINSON</b>		Date of Receipt
Mailing Address 1525 CAROL LANE		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City State Zip Code WICHITA FALLS TX 76302-2005		<b>Transaction ID : 2014M04L11AI05375</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="101.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="386.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. WILLIAM ROBINSON</b>		Date of Receipt
Mailing Address 7811 FLINT ROAD		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code COLUMBUS OH 43235-6420		<b>Transaction ID : 2014M04L11AI05376</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="120.00"/>
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="320.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="271.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 1897 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BEVERLY QUAIL ROBLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1225 17TH STREET 2300

City DENVER	State CO	Zip Code 80202-5535
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05377**

Amount of Each Receipt this Period  
 250.00

**B. MR. FRED ROBY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6435 N. CAMINO DE MICHAEL

City TUCSON	State AZ	Zip Code 85718-1939
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI05378**

Amount of Each Receipt this Period  
 250.00

**C. MR. ALLAN A. ROCKWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5721 JAY STREET

City YORBA LINDA	State CA	Zip Code 92886-5119
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05379**

Amount of Each Receipt this Period  
 201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	701.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1898 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SUSAN A. ROCKWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 6027  
 City State Zip Code  
 SCHENECTADY NY 12301-6027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 345.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05380**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. MARK S. RODACK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16051 COLLINS AVE  
 APT 3502  
 City State Zip Code  
 SUNNY ISLES BEACH FL 33160-4624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05381**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. KENNETH E. RODDY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 133197  
 City State Zip Code  
 TYLER TX 75713-3197  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED RANCHER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05382**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 1899 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. RICK RODELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 225 W. WICKLIFFE CREEK CIR

City EADS State TN Zip Code 38028-3316

FEC ID number of contributing federal political committee. **C**

Name of Employer CORNERSTONE SYSTEMS Occupation CHAIRMAN/FOUNDER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05383**

Amount of Each Receipt this Period  
 1000.00

**B. MRS. LEAH RODIE**  
Full Name (Last, First, Middle Initial)

Mailing Address 16055B E. RICE PLACE APARTMENT B.E.

City AURORA State CO Zip Code 80015-1554

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05384**

Amount of Each Receipt this Period  
 51.00

**C. MRS. LEAH RODIE**  
Full Name (Last, First, Middle Initial)

Mailing Address 16055B E. RICE PLACE APARTMENT B.E.

City AURORA State CO Zip Code 80015-1554

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05385**

Amount of Each Receipt this Period  
 51.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1102.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1900 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RAYMOND RODRIGUEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 144 FRIENDS LANE  
 City WESTBURY State NY Zip Code 11590-6506  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05386**  
 Amount of Each Receipt this Period  
 101.00

**B. MR. LOUIS ROE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2002 HENRY DRIVE  
 City IRVING State TX Zip Code 75061-1818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05387**  
 Amount of Each Receipt this Period  
 35.00

**C. MR. LOUIS ROE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2002 HENRY DRIVE  
 City IRVING State TX Zip Code 75061-1818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05388**  
 Amount of Each Receipt this Period  
 40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 176.00  
**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 1901 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LOUIS ROE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2002 HENRY DRIVE  
 City IRVING State TX Zip Code 75061-1818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05389**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. MITCHELL E. ROE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15626 INDIAN HEAD COURT  
 City RAMONA State CA Zip Code 92065-4511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ROEJACK ROOFING, INC. Occupation ROOFING CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05390**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. RICHARD K. ROEDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11150 SANTA MONICA BLVD.  
 SUITE 750  
 City LOS ANGELES State CA Zip Code 90025-0528  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VANCE STREET CAPITAL, LLC Occupation PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05391**  
 Amount of Each Receipt this Period  
 32400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32521.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1902 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RANDY ROELOFSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 129  
 City ABILENE State KS Zip Code 67410-0129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ABILENE MACHINE, INC. Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05392**  
 Amount of Each Receipt this Period  
 285.00

**B. MR. WILLIAM ROEMER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 42 LITTLE SEWICKLEY CREEK ROAD  
 City SEWICKLEY State PA Zip Code 15143-8393  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05393**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. J. HUGH ROFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 TRAVIS STREET SUITE 7070  
 City HOUSTON State TX Zip Code 77002-2919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ROFF RESOURCES L.L.C. Occupation CHAIRMAN OF THE BOARD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05394**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1785.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1903 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. IRA EDWARD ROGERS SR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 3868 DEMOONEY RD

City COLLEGE PARK State GA Zip Code 30349-1100

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05395**

Amount of Each Receipt this Period  
 250.00

**B. MRS. JEAN ROGERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 540 MCLEAN LANE

City SANTA BARBARA State CA Zip Code 93108-2200

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05396**

Amount of Each Receipt this Period  
 500.00

**C. MS. JUDY M. ROGERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2525 RICHERT AVENUE

City CLOVIS State CA Zip Code 93611-6034

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation EXECUTIVE DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05397**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00

**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 1904 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JUDY M. ROGERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2525 RICHERT AVENUE  
 City CLOVIS State CA Zip Code 93611-6034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation EXECUTIVE DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05398**  
 Amount of Each Receipt this Period 120.00

**B. MS. MARJORIE M. ROGERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4690 RICARA DRIVE  
 City BOULDER State CO Zip Code 80303-3808  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05399**  
 Amount of Each Receipt this Period 50.00

**C. MS. MARJORIE M. ROGERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4690 RICARA DRIVE  
 City BOULDER State CO Zip Code 80303-3808  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05400**  
 Amount of Each Receipt this Period 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00  
**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 1905 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARJORIE M. ROGERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4690 RICARA DRIVE  
 City BOULDER State CO Zip Code 80303-3808  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05401**  
 Amount of Each Receipt this Period  
 1.00

**B. MRS. MARY ANN ROGERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 196 CUSHWA ROAD  
 City MARTINSBURG State WV Zip Code 25403-1223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 481.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI05402**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. MARY ANN ROGERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 196 CUSHWA ROAD  
 City MARTINSBURG State WV Zip Code 25403-1223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 481.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05403**  
 Amount of Each Receipt this Period  
 51.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 152.00  
**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 1906 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ROBERTA F. ROGERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 14515 W. GRANITE VALLEY DRIVE  
APARTMENT E567

City SUN CITY WEST State AZ Zip Code 85375-6024

FEC ID number of contributing federal political committee. **C**

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **751.00**

Date of Receipt: **03 / 12 / 2014**  
**Transaction ID : 2014M04L11AI05404**

Amount of Each Receipt this Period: **250.00**

**B. MS. ROBERTA F. ROGERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 14515 W. GRANITE VALLEY DRIVE  
APARTMENT E567

City SUN CITY WEST State AZ Zip Code 85375-6024

FEC ID number of contributing federal political committee. **C**

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **751.00**

Date of Receipt: **03 / 28 / 2014**  
**Transaction ID : 2014M04L11AI05405**

Amount of Each Receipt this Period: **251.00**

**C. MR. WILLIAM A. ROGERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2400 S. OCEAN DRIVE  
APARTMENT 4100D

City FORT PIERCE State FL Zip Code 34949-8001

FEC ID number of contributing federal political committee. **C**

Name of Employer: **REQUESTED** Occupation: **REQUESTED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt: **03 / 04 / 2014**  
**Transaction ID : 2014M04L11AI05406**

Amount of Each Receipt this Period: **1000.00**

**SUBTOTAL** of Receipts This Page (optional)..... **1501.00**

**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 1907 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DON ROBERT**

Mailing Address 26515 BLONDO COURT

City Waterloo State NE Zip Code 68069-6221

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2014**  
**Transaction ID : 2014M04L11AI05407**

Amount of Each Receipt this Period  
**200.00**

Full Name (Last, First, Middle Initial)  
**B. MR. KEVIN T. ROGUS**

Mailing Address 11457 E. JUAN TABO ROAD

City Scottsdale State AZ Zip Code 85255-5707

FEC ID number of contributing federal political committee. **C**

Name of Employer DUKE REALTY CORPERATION Occupation SENIOR VICE PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **415.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2014**  
**Transaction ID : 2014M04L11AI05408**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**C. MR. LOUIS ROHL**

Mailing Address 580 ALLVIEW TERRACE

City Laguna Beach State CA Zip Code 92651-1552

FEC ID number of contributing federal political committee. **C**

Name of Employer ROHL,LLC Occupation SALES

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  
**03 / 28 / 2014**  
**Transaction ID : 2014M04L11AI05409**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **400.00**

**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 1908 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JERRY R. ROLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 33 JULIA COURT  
 City State Zip Code  
 TOWNSHIP OF WASHINGTON NJ 07676-5108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05410**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. JERRY R. ROLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 33 JULIA COURT  
 City State Zip Code  
 TOWNSHIP OF WASHINGTON NJ 07676-5108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05411**  
 Amount of Each Receipt this Period  
 121.00

**C. DR. SUE ELLEN ROLANDO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5488 PALM LAKE CIRCLE  
 City State Zip Code  
 ORLANDO FL 32819-3905  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05412**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 321.00  
**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 1909 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. NANCY ROLFS**  
Full Name (Last, First, Middle Initial)

Mailing Address 4201 LAKESIDE AVENUE N.  
APARTMENT 202

City BROOKLYN CENTER State MN Zip Code 55429-3822

FEC ID number of contributing federal political committee. **C**

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **251.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : 2014M04L11AI05413**

Amount of Each Receipt this Period  
**1.00**

**B. MR. HARRY ROLLINS**  
Full Name (Last, First, Middle Initial)

Mailing Address 5378 BLACK LANE

City FAIRBORN State OH Zip Code 45324-8823

FEC ID number of contributing federal political committee. **C**

Name of Employer: **ROLLINS M+S** Occupation: **OWNER**

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  
**03 / 24 / 2014**

**Transaction ID : 2014M04L11AI05414**

Amount of Each Receipt this Period  
**750.00**

**C. MR. DAVID G. ROMAN II**  
Full Name (Last, First, Middle Initial)

Mailing Address 6215 CLIFTON CIRCLE

City SUWANEE State GA Zip Code 30024-3393

FEC ID number of contributing federal political committee. **C**

Name of Employer: **REQUESTED** Occupation: **REQUESTED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : 2014M04L11AI05415**

Amount of Each Receipt this Period  
**240.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **991.00**

**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 1910 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DOROTHY ROMERO**  
Full Name (Last, First, Middle Initial)

Mailing Address 21 BISBEE CT

City SANTA FE State NM Zip Code 87508-1338

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05416**

Amount of Each Receipt this Period  
 225.00

**B. MR. JOHN J. ROMERO**  
Full Name (Last, First, Middle Initial)

Mailing Address 1408 BROOKFIELD DRIVE

City LONGMONT State CO Zip Code 80501-6709

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation ENGINEERING ELECTRICAL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05417**

Amount of Each Receipt this Period  
 100.00

**C. MR. JOHN J. RONAYNE III**  
Full Name (Last, First, Middle Initial)

Mailing Address 923 PENNIMAN AVENUE

City PLYMOUTH State MI Zip Code 48170-1623

FEC ID number of contributing federal political committee. **C**

Name of Employer P.N.S. Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05418**

Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 525.00

**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 1911 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRETT T. RONDEAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 40360 CABLE SUNSET ROAD  
 City CABLE State WI Zip Code 54821-4849  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RONDEAU'S SHOPPING CENTER, INC. Occupation RETAIL BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05419**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. RICHARD RONZETTI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 164 HAMPTON ROAD  
 City GARDEN CITY State NY Zip Code 11530-1404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MARATHON ASSET MANAGEMENT Occupation INVESTMENT ANALYST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05420**  
 Amount of Each Receipt this Period  
 5000.00

**C. MR. RICHARD L. ROSCOE SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 W. GLANN ROAD  
 City APALACHIN State NY Zip Code 13732-4025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI05421**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1912 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD L. ROSCOE SR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 4 W. GLANN ROAD

City APALACHIN State NY Zip Code 13732-4025

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05422**

Amount of Each Receipt this Period  
 100.00

**B. MR. WILLIAM S. ROSE JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 93 HARBOUR PASSAGE

City HILTON HEAD State SC Zip Code 29926-1264

FEC ID number of contributing federal political committee. **C**

Name of Employer MC NAIR LAW FIRM Occupation LAWYER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05423**

Amount of Each Receipt this Period  
 250.00

**C. ROBERT ROSENBERG**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 SOUTH POINTE DRIVE APARTMENT 39

City MIAMI BEACH State FL Zip Code 33139-7377

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation CONSULTANT

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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05424**

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00

**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 1913 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. JOHN ROSENBERGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4090 LINCOLN DRIVE  
 City State Zip Code  
 GUILDERLAND NY 12084  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ALHANG MEDICAL COLLEGE PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05425**  
 Amount of Each Receipt this Period  
 140.00

**B. DR. JOHN ROSENBERGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4090 LINCOLN DRIVE  
 City State Zip Code  
 GUILDERLAND NY 12084  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ALHANG MEDICAL COLLEGE PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05426**  
 Amount of Each Receipt this Period  
 91.00

**C. MRS. RICHARD ROSENFELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 826 CHEVY CHASE CIRCLE  
 City State Zip Code  
 SUGAR LAND TX 77478-4011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05427**  
 Amount of Each Receipt this Period  
 206.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 437.00  
**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 1914 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. BRENDA K. ROSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2414 AUTUMN TRAILS DRIVE  
 City State Zip Code  
 MISHAWAKA IN 46544-6727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CLINIC WORK ROSS  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05428**  
 Amount of Each Receipt this Period  
 200.00

**B. MS. CHRISTINA L. ROSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 MINNISINK AVENUE S.  
 City State Zip Code  
 SAYREVILLE NJ 08872-1918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05429**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. ELOISE ROSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 319 LYNN DRIVE  
 City State Zip Code  
 NASHVILLE TN 37211-3611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 521.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05430**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 1915 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. ELOISE ROSS**

Mailing Address 319 LYNN DRIVE

City NASHVILLE	State TN	Zip Code 37211-3611
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
521.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05431**

Amount of Each Receipt this Period  
125.00

Full Name (Last, First, Middle Initial)  
**B. MS. ELOISE ROSS**

Mailing Address 319 LYNN DRIVE

City NASHVILLE	State TN	Zip Code 37211-3611
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
521.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05432**

Amount of Each Receipt this Period  
121.00

Full Name (Last, First, Middle Initial)  
**C. MR. FRANKLIN ARTHUR ROSS**

Mailing Address 10001 S. OSWEGO STREET  
APARTMENT 329

City PARKER	State CO	Zip Code 80134-8114
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05433**

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	247.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1916 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KATHRYN S. ROSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15800 THOMPSON ROAD  
 City ALPHARETTA State GA Zip Code 30004-0973  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05434**  
 Amount of Each Receipt this Period  
 50.00

**B. MRS. KATHRYN S. ROSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15800 THOMPSON ROAD  
 City ALPHARETTA State GA Zip Code 30004-0973  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05435**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. KATHRYN S. ROSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15800 THOMPSON ROAD  
 City ALPHARETTA State GA Zip Code 30004-0973  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05436**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00  
**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 1917 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. SUSAN T. ROSS</b>		Date of Receipt
Mailing Address 3310 BROWNSVILLE ROAD APARTMENT 15		<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City PITTSBURGH	State PA	Zip Code 15227-2758
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI05437</b>
Name of Employer REQUESTED		Occupation REQUESTED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="25.00"/>
<input type="text" value="204.00"/>		

Full Name (Last, First, Middle Initial) <b>B. MS. SUSAN T. ROSS</b>		Date of Receipt
Mailing Address 3310 BROWNSVILLE ROAD APARTMENT 15		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City PITTSBURGH	State PA	Zip Code 15227-2758
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI05438</b>
Name of Employer REQUESTED		Occupation REQUESTED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="15.00"/>
<input type="text" value="204.00"/>		

Full Name (Last, First, Middle Initial) <b>C. MS. SUSAN T. ROSS</b>		Date of Receipt
Mailing Address 3310 BROWNSVILLE ROAD APARTMENT 15		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City PITTSBURGH	State PA	Zip Code 15227-2758
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2014M04L11AI05439</b>
Name of Employer REQUESTED		Occupation REQUESTED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="12.00"/>
<input type="text" value="204.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="52.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 1918 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SUSAN T. ROSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3310 BROWNSVILLE ROAD  
 APARTMENT 15  
 City PITTSBURGH State PA Zip Code 15227-2758  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05440**  
 Amount of Each Receipt this Period  
 37.00

**B. MS. SUSAN T. ROSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3310 BROWNSVILLE ROAD  
 APARTMENT 15  
 City PITTSBURGH State PA Zip Code 15227-2758  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05441**  
 Amount of Each Receipt this Period  
 15.00

**C. MRS. JUDITH ROSSITER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1116 W. CHAUTAUQUA STREET  
 City CARBONDALE State IL Zip Code 62901-2453  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05442**  
 Amount of Each Receipt this Period  
 140.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 192.00  
**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 1919 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JUDITH ROSSITER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1116 W. CHAUTAUQUA STREET  
 City CARBONDALE State IL Zip Code 62901-2453  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05443**  
 Amount of Each Receipt this Period  
 275.00

**B. MRS. LEE ROSTAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 782 SONOMA DRIVE  
 City HELENA State MT Zip Code 59601-8632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05444**  
 Amount of Each Receipt this Period  
 100.00

**C. DR. LANE G. ROTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 MORNING SUN  
 City IRVINE State CA Zip Code 92603-3715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05445**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	476.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1920 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. NANCY B. ROTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8545 CARMEL VALLEY ROAD  
 City State Zip Code  
 CARMEL CA 93923-9556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05446**  
 Amount of Each Receipt this Period  
 75.00

**B. MRS. NANCY B. ROTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8545 CARMEL VALLEY ROAD  
 City State Zip Code  
 CARMEL CA 93923-9556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05447**  
 Amount of Each Receipt this Period  
 75.00

**C. MR. JAY O. ROTHMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 E. CIRCLE DRIVE  
 City State Zip Code  
 WHITEFISH BAY WI 53217-5366  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED ATTORNEY  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05448**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00  
**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 1921 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD T. ROUNDTREE**  
Full Name (Last, First, Middle Initial)

Mailing Address 210 TRACE COLONY

City State Zip Code  
RIDGELAND MS 39157-8810

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05449**

Amount of Each Receipt this Period  
500.00

**B. MR. GEORGE ROUNTREE III**  
Full Name (Last, First, Middle Initial)

Mailing Address 1960 HILLSBORO ROAD

City State Zip Code  
WILMINGTON NC 28403-5370

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05450**

Amount of Each Receipt this Period  
500.00

**C. MR. CHARLES R. ROUSSEAU**  
Full Name (Last, First, Middle Initial)

Mailing Address 28645 VIA PASATIEMPO

City State Zip Code  
LAGUNA NIGUEL CA 92677-7611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05451**

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1922 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. PALMER ROWE**

Mailing Address 411 MEADOWOOD ROAD

City State Zip Code  
GADSDEN AL 35901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05452**

Amount of Each Receipt this Period  
220.00

Full Name (Last, First, Middle Initial)  
**B. MR. RAYMOND EDGAR ROWLAND**

Mailing Address 4253 SANCTUARY WAY

City State Zip Code  
BONITA SPRINGS FL 34134-8721

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05453**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. MR. FLOYD R. ROWLEY JR.**

Mailing Address 6035 LAKE GENEVA DRIVE

City State Zip Code  
RENO NV 89511-5050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
COLLIERS INTERNATIONAL REAL ESTATE BROKER

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  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05454**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1320.00

**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 1923 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FLOYD R. ROWLEY JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6035 LAKE GENEVA DRIVE  
 City RENO State NV Zip Code 89511-5050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COLLIERS INTERNATIONAL Occupation REAL ESTATE BROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05455**  
 Amount of Each Receipt this Period 50.00

**B. MS. CYNTHIA ROY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8009 35 AVENUE APARTMENT D4  
 City JACKSON HEIGHTS State NY Zip Code 11372-4941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BOARD OF EDUCATION Occupation SCHOOL TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05456**  
 Amount of Each Receipt this Period 100.00

**C. MS. CYNTHIA ROY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8009 35 AVENUE APARTMENT D4  
 City JACKSON HEIGHTS State NY Zip Code 11372-4941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BOARD OF EDUCATION Occupation SCHOOL TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05457**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00  
**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 1924 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JAMES ROYER**

Mailing Address 4013 MCPHERSON DR

City ACWORTH State GA Zip Code 30101-6368

FEC ID number of contributing federal political committee. **C**

Name of Employer PARK PLACE BROKERS Occupation REAL ESTATE BROKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI05458**

Amount of Each Receipt this Period  
 215.00

Full Name (Last, First, Middle Initial)  
**B. MR. MANSEL M. RUBENSTEIN**

Mailing Address 1 GREENWAY PLAZA SUITE 1000

City HOUSTON State TX Zip Code 77046-0109

FEC ID number of contributing federal political committee. **C**

Name of Employer CEMENT LIVING COMPANY, INC. Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05459**

Amount of Each Receipt this Period  
 1600.00

Full Name (Last, First, Middle Initial)  
**C. MR. SAMUEL RUBINFELD**

Mailing Address P.O. BOX 11024

City MARINA DEL REY State CA Zip Code 90295-7024

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE BROKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05460**

Amount of Each Receipt this Period  
 270.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2085.00

**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 1925 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JERRED B. RUBLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 754 342ND STREET  
 City HANLONTOWN State IA Zip Code 50444-7511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 TEAM QUEST SOFTWARE ENGINEER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05461**  
 Amount of Each Receipt this Period  
 220.00

**B. MS. JESSIE E. RUBY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 800  
 City BUDA State TX Zip Code 78610-0800  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 862.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05462**  
 Amount of Each Receipt this Period  
 210.00

**C. MS. JESSIE E. RUBY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 800  
 City BUDA State TX Zip Code 78610-0800  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 862.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05463**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 680.00  
**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 1926 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. JESSIE E. RUBY**

Mailing Address P.O. BOX 800

City BUDA State TX Zip Code 78610-0800

FEC ID number of contributing federal political committee. **C**

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **862.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**

**Transaction ID : 2014M04L11AI05464**

Amount of Each Receipt this Period  
**202.00**

Full Name (Last, First, Middle Initial)  
**B. MS. BRIDGET SUSAN RUCCI**

Mailing Address 519 16TH AVE S

City JACKSONVILLE BEACH State FL Zip Code 32250-4932

FEC ID number of contributing federal political committee. **C**

Name of Employer: **PGA TOUR** Occupation: **TRAVEL AGENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **265.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 11 / 2014**

**Transaction ID : 2014M04L11AI05465**

Amount of Each Receipt this Period  
**20.00**

Full Name (Last, First, Middle Initial)  
**C. MR. PAUL R. RUDDER**

Mailing Address 415 L. AMBIANCE DRIVE  
APARTMENT 204

City LONGBOAT KEY State FL Zip Code 34228-3909

FEC ID number of contributing federal political committee. **C**

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **261.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 12 / 2014**

**Transaction ID : 2014M04L11AI05466**

Amount of Each Receipt this Period  
**65.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>287.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1927 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PAUL R. RUDDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 415 L. AMBIANCE DRIVE  
 APARTMENT 204  
 City LONGBOAT KEY State FL Zip Code 34228-3909  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05467**  
 Amount of Each Receipt this Period  
 26.00

**B. MR. MILTON H. RUDI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1114 WILLOW BRIDGE LANE  
 City MISHAWAKA State IN Zip Code 46545-8910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05468**  
 Amount of Each Receipt this Period  
 500.00

**C. MRS. NANCY S. RUDLOFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1361 E. BOOT ROAD  
 City WEST CHESTER State PA Zip Code 19380-5988  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05469**  
 Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 636.00  
**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 1928 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. NANCY S. RUDLOFF**  
Full Name (Last, First, Middle Initial)

Mailing Address 1361 E. BOOT ROAD

City WEST CHESTER State PA Zip Code 19380-5988

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05470**

Amount of Each Receipt this Period  
**50.00**

**B. DR. FRED L. RUDMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 11643 MEETING HOUSE ROAD

City MYERSVILLE State MD Zip Code 21773-8905

FEC ID number of contributing federal political committee. **C**

Name of Employer RUDMAN & KANE, P.A. Occupation DENTIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05471**

Amount of Each Receipt this Period  
**215.00**

**C. MR. DAVID E. RUDOLPH**  
Full Name (Last, First, Middle Initial)

Mailing Address 8319 E CALLE DE ALEGRIA

City SCOTTSDALE State AZ Zip Code 85255-4226

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05472**

Amount of Each Receipt this Period  
**300.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>565.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1929 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. CHARLES RUEN**

Mailing Address 24997 GRACEFUL ROAD

City Lanesboro State MN Zip Code 55949-8292

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05473**

Amount of Each Receipt this Period  
101.00

Full Name (Last, First, Middle Initial)  
**B. MR. JOSEPH F. RUETH**

Mailing Address 43 WATERWHEEL CIRCLE

City Dover State DE Zip Code 19901-6261

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05474**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**C. MR. R. KANE RUFÉ**

Mailing Address 23005 N. 74TH STREET #4034

City Scottsdale State AZ Zip Code 85255-7521

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
486.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05475**

Amount of Each Receipt this Period  
1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 402.00

**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 1930 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. CAMPBELL G. RUFF**

Mailing Address 11553 HEMINGWAY DRIVE

City	State	Zip Code
RESTON	VA	20194-1240

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
540.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2014

**Transaction ID : 2014M04L11AI05476**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. CAMPBELL G. RUFF**

Mailing Address 11553 HEMINGWAY DRIVE

City	State	Zip Code
RESTON	VA	20194-1240

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
540.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : 2014M04L11AI05477**

Amount of Each Receipt this Period  
220.00

Full Name (Last, First, Middle Initial)  
**C. MS. ELIZABETH MOORE RUFFIN**

Mailing Address 1707 JARVIS STREET

City	State	Zip Code
RALEIGH	NC	27608-2236

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2014

**Transaction ID : 2014M04L11AI05478**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	570.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1931 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT S. RUFFIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6405 EMBARCADERO DRIVE  
 City STOCKTON State CA Zip Code 95219-3827  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 316.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05479**  
 Amount of Each Receipt this Period  
 76.00

**B. MRS. SUSAN T. RUHL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 HOLLY HILL ROAD  
 City ASHEVILLE State NC Zip Code 28803-3114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 551.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05480**  
 Amount of Each Receipt this Period  
 51.00

**C. MR. JOHN M. RULAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 39873 S. JUSTIN LANE  
 City TUCSON State AZ Zip Code 85739-2000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05481**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 177.00  
**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 1932 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. H. LORRAINE RUMNEY</b>		Date of Receipt
Mailing Address P.O. BOX 70		M M M / D D D / Y Y Y Y Y Y 03 / 25 / 2014
City	State	Zip Code
CUT BANK	MT	59427-0070
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI05482
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		100.00
Name of Employer	Occupation	
SELF-EMPLOYED	RANCHER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1040.00	

Full Name (Last, First, Middle Initial) <b>B. MR. ROBERT H. RUMPF</b>		Date of Receipt
Mailing Address 59 MAGAW AVENUE		M M M / D D D / Y Y Y Y Y Y 03 / 11 / 2014
City	State	Zip Code
CARLISLE	PA	17015-7619
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI05483
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		110.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	380.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. RONALD R. RUNGE</b>		Date of Receipt
Mailing Address 4284 DOGWOOD AVENUE		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2014
City	State	Zip Code
SEAL BEACH	CA	90740-2851
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI05484
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		200.00
Name of Employer	Occupation	
HOMEMAKER	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	475.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	410.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1933 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. NICK RUNNEBOHM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3177 S. 375TH E.  
 City State Zip Code  
 SHELBYVILLE IN 46176-9245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RUNNEBOHM CONSTRUCTION, CO, INC. GENERAL CONTRACTOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05485**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. ANTONIN RUSEK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 UNIVERSITY AVENUE  
 City State Zip Code  
 SELINGSGROVE PA 17870-1410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SUSQUEHANNA UNIVERSITY ECONOMIST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05486**  
 Amount of Each Receipt this Period  
 135.00

**C. MR. THOMAS A. RUSH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 30 HORSE MESA CIRCLE  
 City State Zip Code  
 SEDONA AZ 86351-7700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05487**  
 Amount of Each Receipt this Period  
 111.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 746.00  
**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 1934 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. BRYAN W. RUSSELL</b>		Date of Receipt 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI05488</b>
Mailing Address 241 LAKESHORE DRIVE		Amount of Each Receipt this Period 500.00
City CHEYENNE	State WY	Zip Code 82009-4005
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. MR. BRYAN W. RUSSELL</b>		Date of Receipt 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI05489</b>
Mailing Address 241 LAKESHORE DRIVE		Amount of Each Receipt this Period 500.00
City CHEYENNE	State WY	Zip Code 82009-4005
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. DALE DORSETT RUSSELL</b>		Date of Receipt 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI05490</b>
Mailing Address 6091 E. GATEWAY COURT		Amount of Each Receipt this Period 250.00
City BOISE	State ID	Zip Code 83716-9094
FEC ID number of contributing federal political committee. C		
Name of Employer BOISE STATE UNIVERSITY	Occupation PROFESSOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1935 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. DAVID S. RUSSELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2113 WILSHIRE DRIVE  
 City State Zip Code  
 ENID OK 73703-6622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05491**  
 Amount of Each Receipt this Period  
 1000.00

**B. MRS. ESTHER L. RUSSELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1720 CORDOVA GORGAS ROAD  
 City State Zip Code  
 CORDOVA AL 35550-5024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 326.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05492**  
 Amount of Each Receipt this Period  
 75.00

**C. MRS. ESTHER L. RUSSELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1720 CORDOVA GORGAS ROAD  
 City State Zip Code  
 CORDOVA AL 35550-5024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 326.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05493**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1076.00  
**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 1936 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. GERALDINE RUSSELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 5711 WESTER WAY DRIVE

City ARLINGTON State TX Zip Code 76013-5235

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 03 / 13 / 2014  
Transaction ID : 2014M04L11AI05494

Amount of Each Receipt this Period 275.00

**B. MR. JAMES D. RUSSELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1820 N.E. 104TH AVENUE APARTMENT 66

City PORTLAND State OR Zip Code 97220-3819

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 17 / 2014  
Transaction ID : 2014M04L11AI05495

Amount of Each Receipt this Period 5000.00

**C. MR. JOHN W. RUSSELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 4134 HORN SPRINGS ROAD

City LEBANON State TN Zip Code 37087-1989

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt 03 / 10 / 2014  
Transaction ID : 2014M04L11AI05496

Amount of Each Receipt this Period 15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5290.00

**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 1937 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN W. RUSSELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4134 HORN SPRINGS ROAD  
 City LEBANON State TN Zip Code 37087-1989  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05497**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. MARGARET M. RUSSELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 702 N. CANON DRIVE  
 City BEVERLY HILLS State CA Zip Code 90210-3328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05498**  
 Amount of Each Receipt this Period  
 500.00

**C. MRS. PATRICIA RUSSELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 DOUGLAS DRIVE  
 City NEWPORT NEWS State VA Zip Code 23601-3610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05499**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1938 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD K. RUSSELL SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 198 HARD HILL ROAD N.  
 City BETHLEHEM State CT Zip Code 06751-1519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05500**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. ROGER H. RUSSELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 788 S.W. 10TH AVENUE  
 City SAINT JOHN State KS Zip Code 67576-7608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05501**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. PATRICIA F. RUSSO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19-2 HERITAGE COURT  
 City FAR HILLS State NJ Zip Code 07931-2320  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HP Occupation DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05502**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**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 1939 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN RUTHERFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 103 FOXWOOD DRIVE  
 City MOORESTOWN State NJ Zip Code 08057-4106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05503**  
 Amount of Each Receipt this Period 150.00

**B. MRS. ANNE M. RYAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5402 PENNOCK POINT ROAD  
 City JUPITER State FL Zip Code 33458-3448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MUSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05504**  
 Amount of Each Receipt this Period 100.00

**C. MR. JAMES J. RYAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5785 HARVEY CIRCLE  
 City CINCINNATI State OH Zip Code 45233-1674  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05505**  
 Amount of Each Receipt this Period 235.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	485.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1940 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN J. RYAN III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 OCEAN LANE DRIVE  
 APARTMENT 1002  
 City KEY BISCAWAYNE State FL Zip Code 33149-1420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05506**  
 Amount of Each Receipt this Period  
 2500.00

**B. MR. JOHN J. RYAN III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 OCEAN LANE DRIVE  
 APARTMENT 1002  
 City KEY BISCAWAYNE State FL Zip Code 33149-1420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05507**  
 Amount of Each Receipt this Period  
 1600.00

**C. MS. KAREN RYAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7641 N. 175TH AVENUE  
 City WADDELL State AZ Zip Code 85355-9842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1051.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05508**  
 Amount of Each Receipt this Period  
 51.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4151.00  
**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 1941 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. MAGDALENE A. RYAN**

Mailing Address 8552 DEANO

City State Zip Code  
NEWPORT MI 48166-9261

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
411.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05509**

Amount of Each Receipt this Period  
55.00

Full Name (Last, First, Middle Initial)  
**B. MS. MAGDALENE A. RYAN**

Mailing Address 8552 DEANO

City State Zip Code  
NEWPORT MI 48166-9261

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
411.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05510**

Amount of Each Receipt this Period  
70.00

Full Name (Last, First, Middle Initial)  
**C. MS. MAGDALENE A. RYAN**

Mailing Address 8552 DEANO

City State Zip Code  
NEWPORT MI 48166-9261

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
411.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05511**

Amount of Each Receipt this Period  
55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 180.00

**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 1942 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MAGDALENE A. RYAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8552 DEANO  
 City NEWPORT State MI Zip Code 48166-9261  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 411.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05512**  
 Amount of Each Receipt this Period  
 75.00

**B. MS. MAGDALENE A. RYAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8552 DEANO  
 City NEWPORT State MI Zip Code 48166-9261  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 411.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05513**  
 Amount of Each Receipt this Period  
 51.00

**C. MR. MARTIN F. RYAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6342 RIVER DOWNS ROAD  
 City ALEXANDRIA State VA Zip Code 22312-1557  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RESTAURANT OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05514**  
 Amount of Each Receipt this Period  
 201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 327.00  
**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 1943 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD P. RYAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1602 WINNERS CUP CR

City ST.CHARLES State IL Zip Code 60174-5846

FEC ID number of contributing federal political committee. **C**

Name of Employer LEAN ADVANTAGE INC Occupation EXECUTIVE

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  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05515**

Amount of Each Receipt this Period  
 100.00

**B. MR. ROBERT S. RYAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 48 CHERRYWOOD DRIVE

City LEWISBURG State PA Zip Code 17837-9703

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

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  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05516**

Amount of Each Receipt this Period  
 750.00

**C. MR. MARK RYDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3933 ARCADIA DRIVE

City ANN ARBOR State MI Zip Code 48108-8403

FEC ID number of contributing federal political committee. **C**

Name of Employer RUNRYDER DOT COM LLC Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05517**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1944 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARY B. RYSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 476

City MELFA	State VA	Zip Code 23410-0476
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1466.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05518**

Amount of Each Receipt this Period  
 1000.00

**B. MS. MARY B. RYSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 476

City MELFA	State VA	Zip Code 23410-0476
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1466.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05519**

Amount of Each Receipt this Period  
 100.00

**C. MS. MARY B. RYSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 476

City MELFA	State VA	Zip Code 23410-0476
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1466.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05520**

Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1945 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARY B. RYSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 476

City MELFA	State VA	Zip Code 23410-0476
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1466.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05521**

Amount of Each Receipt this Period  
 1.00

**B. HILLAND B. SABISTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 54 S. DREXEL FARM DRIVE

City HENDERSONVILLE	State NC	Zip Code 28739-8755
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05522**

Amount of Each Receipt this Period  
 120.00

**C. HILLAND B. SABISTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 54 S. DREXEL FARM DRIVE

City HENDERSONVILLE	State NC	Zip Code 28739-8755
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05523**

Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	122.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1946 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. HILLAND B. SABISTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 54 S. DREXEL FARM DRIVE  
 City HENDERSONVILLE State NC Zip Code 28739-8755  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05524**  
 Amount of Each Receipt this Period  
 50.00

**B. MS. ELSIE M. SABO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 66540 WARNOCK SAINT CLAIRSVI ROAD  
 City SAINT CLAIRSVILLE State OH Zip Code 43950-9460  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI05525**  
 Amount of Each Receipt this Period  
 105.00

**C. MS. KATHRYN SACRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 339  
 City WHITEHALL State MT Zip Code 59759-0339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05526**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	405.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1947 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. E. HAROLD SAER JR.</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI05527</b>
Mailing Address 100 CHRISTWOOD BLVD. APARTMENT 246		Amount of Each Receipt this Period 200.00
City COVINGTON	State Zip Code LA 70433-4604	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. MR. E. HAROLD SAER JR.</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2014 <b>Transaction ID : 2014M04L11AI05528</b>
Mailing Address 100 CHRISTWOOD BLVD. APARTMENT 246		Amount of Each Receipt this Period 100.00
City COVINGTON	State Zip Code LA 70433-4604	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. MR. GEORGE E. SAFIOL</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 05 / 2014 <b>Transaction ID : 2014M04L11AI05529</b>
Mailing Address 64 JUNIPER ROAD		Amount of Each Receipt this Period 100.00
City WESTON	State Zip Code MA 02493-1358	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1948 OF 2949  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE E. SAFIOL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 64 JUNIPER ROAD  
City WESTON State MA Zip Code 02493-1358  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05530**  
Amount of Each Receipt this Period 100.00

**B. MR. JOHN R. SAGAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1314 FOREST AVE.  
City EVANSTON State IL Zip Code 60201-4708  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MAYER BROWN LLP Occupation LAWYER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05531**  
Amount of Each Receipt this Period 251.00

**C. MR. DON B. SAKEL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4109 ANSON DRIVE  
City FLOYDS KNOBS State IN Zip Code 47119-9309  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05532**  
Amount of Each Receipt this Period 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 381.00  
**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 1949 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DON B. SAKEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4109 ANSON DRIVE  
 City FLOYDS KNOBS State IN Zip Code 47119-9309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05533**  
 Amount of Each Receipt this Period 300.00

**B. DR. PAUL SAKIEWICZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11612 E BERRY AVE ENGLEWOOD  
 City ENGLEWOOD State CO Zip Code 80111-4155  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DNPC Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05534**  
 Amount of Each Receipt this Period 200.00

**C. MR. FREDERICK J. SALEK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 51 CASTLE HEIGHTS AVENUE  
 City TARRYTOWN State NY Zip Code 10591-3701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05535**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 430.00  
**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 1950 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE P. SALIARIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 159  
 City HILLIARD State OH Zip Code 43026-0159  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RAGE CORPORATION Occupation MANUFACTURER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05536**  
 Amount of Each Receipt this Period 300.00

**B. MR. MARION SALING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4012 DRY CREEK ROAD  
 City MEDFORD State OR Zip Code 97504-9716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05537**  
 Amount of Each Receipt this Period 250.00

**C. MS. MEGAN SALZMAN MEDICA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 244  
 City MIDDLEBURG State VA Zip Code 20118-0244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05538**  
 Amount of Each Receipt this Period 4500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5050.00  
**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 1951 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CARLOS M. SAMALOT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1166  
 City ISABELA State PR Zip Code 00662-1166  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05539**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. LEONARD J. SAMIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 60 LEO BIRMINGHAM PARKWAY  
 City BRIGHTON State MA Zip Code 02135-1123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05540**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. LEONARD J. SAMIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 60 LEO BIRMINGHAM PARKWAY  
 City BRIGHTON State MA Zip Code 02135-1123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05541**  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2100.00  
**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 1952 OF 2949  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. WILLIAM J. SAMPLE**

Mailing Address 1634 SPRINGBROOK DRIVE

City State Zip Code  
ELKHART IN 46514-4248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05542**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. MR. WILLIAM J. SAMPLE**

Mailing Address 1634 SPRINGBROOK DRIVE

City State Zip Code  
ELKHART IN 46514-4248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05543**

Amount of Each Receipt this Period  
55.00

Full Name (Last, First, Middle Initial)  
**C. MR. WILLIAM J. SAMPLE**

Mailing Address 1634 SPRINGBROOK DRIVE

City State Zip Code  
ELKHART IN 46514-4248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05544**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 155.00

**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 1953 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM J. SAMPLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1634 SPRINGBROOK DRIVE

City ELKHART State IN Zip Code 46514-4248

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05545**

Amount of Each Receipt this Period  
 120.00

**B. MRS. MARLYS H. SAMPSON-BARTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1264 COUNTY ROAD 248  
P.O. BOX 97

City WEIMAR State TX Zip Code 78962-4541

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation RANCHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05546**

Amount of Each Receipt this Period  
 110.00

**C. DR. BRUCE J. SAMS JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 88 LAGOON ROAD

City BELVEDERE State CA Zip Code 94920-2349

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05547**

Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1230.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1954 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALVIN SAMUELS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200B METAIRIE ROAD  
 701 PAPWORTH #203  
 City METAIRIE State LA Zip Code 70005-6500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05548**  
 Amount of Each Receipt this Period  
 180.00

**B. MRS. JEAN M. SAMUELSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3308 SQUAW MOUNTAIN DRIVE  
 City LAS CRUCES State NM Zip Code 88011-8652  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI05549**  
 Amount of Each Receipt this Period  
 195.00

**C. MARCE SANCHEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6016 LAGORCE DRIVE  
 City MIAMI BEACH State FL Zip Code 33140-2117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PARAMOUNT Occupation R.E. DEVELOPMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05550**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	485.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1955 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KEITH SAND**  
Full Name (Last, First, Middle Initial)

Mailing Address 12195 NORWAY ROAD

City AVON State MN Zip Code 56310-4502

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05551**

Amount of Each Receipt this Period  
 100.00

**B. DR. FOSTER J. SANDERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 901 LONGFIELD CIRCLE

City CHARLOTTE State NC Zip Code 28270-9787

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05552**

Amount of Each Receipt this Period  
 301.00

**C. MRS. KATHLEEN E. SANDERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1409 W. DOW RUMMEL STREET  
APARTMENT 115

City SIOUX FALLS State SD Zip Code 57104-7807

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05553**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 501.00

**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 1956 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. RUTHANNE SANDUSKY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5790 DENLINGER ROAD  
 APARTMENT 6107  
 City Trotwood State OH Zip Code 45426-1838  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **210.00**

Date of Receipt **03 / 12 / 2014**  
**Transaction ID : 2014M04L11AI05554**  
 Amount of Each Receipt this Period **100.00**

**B. MR. STEVEN L. SANFREY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7729 CASTLE ROCK DRIVE  
 City Warren State OH Zip Code 44484-1408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WEST MATERIALS, INC Occupation MANAGER PRODUCT DEVELOPMENT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **230.00**

Date of Receipt **03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI05555**  
 Amount of Each Receipt this Period **75.00**

**C. MR. STEVEN L. SANFREY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7729 CASTLE ROCK DRIVE  
 City Warren State OH Zip Code 44484-1408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WEST MATERIALS, INC Occupation MANAGER PRODUCT DEVELOPMENT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **230.00**

Date of Receipt **03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI05556**  
 Amount of Each Receipt this Period **30.00**

**SUBTOTAL** of Receipts This Page (optional)..... **205.00**  
**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 1957 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEVEN L. SANFREY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7729 CASTLE ROCK DRIVE  
 City WARREN State OH Zip Code 44484-1408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WEST MATERIALS, INC Occupation MANAGER PRODUCT DEVELOPMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05557**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. STEVEN L. SANFREY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7729 CASTLE ROCK DRIVE  
 City WARREN State OH Zip Code 44484-1408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WEST MATERIALS, INC Occupation MANAGER PRODUCT DEVELOPMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05558**  
 Amount of Each Receipt this Period  
 75.00

**C. MR. MATT R. SANSOM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2224 E. FARM BROOK WAY  
 City SANDY State UT Zip Code 84093-6478  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MEGA DYNE MEDICAL PRODUCTS Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05559**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	245.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1958 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. BALBINITA M. SANTIAGO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6913 STANFORD OAK DRIVE  
 City State Zip Code  
 SACRAMENTO CA 95842-2216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05560**  
 Amount of Each Receipt this Period  
 40.00

**B. MS. BALBINITA M. SANTIAGO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6913 STANFORD OAK DRIVE  
 City State Zip Code  
 SACRAMENTO CA 95842-2216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05561**  
 Amount of Each Receipt this Period  
 15.00

**C. MS. BALBINITA M. SANTIAGO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6913 STANFORD OAK DRIVE  
 City State Zip Code  
 SACRAMENTO CA 95842-2216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05562**  
 Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 90.00  
**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 1959 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. BALBINITA M. SANTIAGO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6913 STANFORD OAK DRIVE  
 City SACRAMENTO State CA Zip Code 95842-2216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05563**  
 Amount of Each Receipt this Period  
 50.00

**B. MS. BALBINITA M. SANTIAGO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6913 STANFORD OAK DRIVE  
 City SACRAMENTO State CA Zip Code 95842-2216  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05564**  
 Amount of Each Receipt this Period  
 21.00

**C. MR. LOUIS J. SANTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15704 SE 34TH CIRCLE  
 City VANCOUVER State WA Zip Code 98683-3700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05565**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	271.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1960 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LOUIS J. SANTIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15704 SE 34TH CIRCLE  
 City VANCOUVER State WA Zip Code 98683-3700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05566**  
 Amount of Each Receipt this Period  
 1.00

**B. MS. JESSICA SAPUTO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5525 LEEDS COURT  
 City OAKLAND TOWNSHIP State MI Zip Code 48306-4911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05567**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. JOHN W. SARGEANT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 118 WOODHAVEN DRIVE  
 City SIDNEY State OH Zip Code 45365-9478  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05568**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 551.00  
**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 1961 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. BARBARA SARGENT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7827 VENETIAN WAY  
 City INDIANAPOLIS State IN Zip Code 46217-4322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05569**  
 Amount of Each Receipt this Period 45.00

**B. MR. WALTER L. SARGENT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 82 COUNTRY CLUB DRIVE  
 City YARMOUTH PORT State MA Zip Code 02675-1607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer W.L.S. SPORTS MARKETING, INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05570**  
 Amount of Each Receipt this Period 120.00

**C. MR. WALTER L. SARGENT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 82 COUNTRY CLUB DRIVE  
 City YARMOUTH PORT State MA Zip Code 02675-1607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer W.L.S. SPORTS MARKETING, INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05571**  
 Amount of Each Receipt this Period 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	265.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1962 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. SALIL D. SARKAR**  
Full Name (Last, First, Middle Initial)

Mailing Address 2400 JOHNSON AVENUE  
APARTMENT 5E

City BRONX State NY Zip Code 10463-6405

FEC ID number of contributing federal political committee. **C**

Name of Employer JACOBI MEDICAL CENTER Occupation PHYSICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 311.00

Date of Receipt  
03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05572**

Amount of Each Receipt this Period  
111.00

**B. MR. EMIL SAROCH JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 237 ANCHORAGE COURT

City ANNAPOLIS State MD Zip Code 21409-6301

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. NAVY Occupation SAILOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05573**

Amount of Each Receipt this Period  
200.00

**C. MR. CARL SASSANO**  
Full Name (Last, First, Middle Initial)

Mailing Address 22 CHATUACHEE XING

City SAVANNAH State GA Zip Code 31411-1602

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05574**

Amount of Each Receipt this Period  
106.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	417.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1963 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KATHY SASSER**  
Full Name (Last, First, Middle Initial)

Mailing Address 913 BOGUE CHITTO ROAD S.W.

City BOGUE CHITTO State MS Zip Code 39629-9545

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05575**

Amount of Each Receipt this Period  
250.00

**B. MR. YONE SATODA**  
Full Name (Last, First, Middle Initial)

Mailing Address 1600 WEBSTER STREET APARTMENT 310

City SAN FRANCISCO State CA Zip Code 94115-3294

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05576**

Amount of Each Receipt this Period  
250.00

**C. MR. L. MARTIN SAULS III**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1630

City RIDGELAND State SC Zip Code 29936-2628

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FUNERAL DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05577**

Amount of Each Receipt this Period  
4000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4500.00

**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 1964 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. J. B. SAUNDERS III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18505 N. ANTLER WAY  
 City State Zip Code  
 EDMOND OK 73012-8709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05578**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. THEODORE SAWYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 242 MAIN STREET  
 UNIT 105  
 City State Zip Code  
 SALEM NH 03079-2753  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05579**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. MICHAEL J. SAXON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 514 BROOKSTONE COURT  
 City State Zip Code  
 COPLEY OH 44321-1265  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 AMTRUST FINANCIAL C.O.O.  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05580**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 621.00  
**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 1965 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. KIM SCAFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21931 E. RIDGE TRAIL CIRCLE

City AURORA	State CO	Zip Code 80016-2665
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
412.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05581**

Amount of Each Receipt this Period  
 100.00

**B. MRS. KIM SCAFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21931 E. RIDGE TRAIL CIRCLE

City AURORA	State CO	Zip Code 80016-2665
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
412.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05582**

Amount of Each Receipt this Period  
 156.00

**C. MRS. KIM SCAFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21931 E. RIDGE TRAIL CIRCLE

City AURORA	State CO	Zip Code 80016-2665
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
412.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05583**

Amount of Each Receipt this Period  
 156.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	412.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1966 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CHARLOTTE SWINNEY SCALES**  
Full Name (Last, First, Middle Initial)

Mailing Address 912 MOUNTAIN TOP DRIVE

City MARIETTA State GA Zip Code 30062-3201

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05584**

Amount of Each Receipt this Period  
 110.00

**B. MR. ANTHONY SCARAMUCCI**  
Full Name (Last, First, Middle Initial)

Mailing Address 527 MADISON AVENUE FLOOR 16

City NEW YORK State NY Zip Code 10022-4365

FEC ID number of contributing federal political committee. **C**

Name of Employer SKYBRIDGE CAPITAL Occupation MANAGING PARTNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05585**

Amount of Each Receipt this Period  
 32400.00

**C. MR. JOHN SCEPANSKI**  
Full Name (Last, First, Middle Initial)

Mailing Address 455 E. MORGAN AVENUE

City MILWAUKEE State WI Zip Code 53207-3309

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 770.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05586**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32610.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1967 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN SCEPANSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 455 E. MORGAN AVENUE  
 City MILWAUKEE State WI Zip Code 53207-3309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 770.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05587**  
 Amount of Each Receipt this Period  
 70.00

**B. MR. JOHN SCEPANSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 455 E. MORGAN AVENUE  
 City MILWAUKEE State WI Zip Code 53207-3309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 770.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05588**  
 Amount of Each Receipt this Period  
 70.00

**C. MR. HAROLD J. SCHACHTNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1145 W. 8TH STREET APARTMENT 319  
 City NEW RICHMOND State WI Zip Code 54017-1473  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05589**  
 Amount of Each Receipt this Period  
 90.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 230.00  
**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 1968 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GENE R. SCHAEFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1425 57TH STREET W.  
 City BRADENTON State FL Zip Code 34209-4713  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI05590**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. GENE R. SCHAEFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1425 57TH STREET W.  
 City BRADENTON State FL Zip Code 34209-4713  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05591**  
 Amount of Each Receipt this Period  
 51.00

**C. MS. MARGARET N. SCHAEFFNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11899 ABERDEEN STREET NE  
 City BLAINE State MN Zip Code 55449-4787  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05592**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 271.00  
**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 1969 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARGARET N. SCHAEFFNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11899 ABERDEEN STREET NE  
 City BLAINE State MN Zip Code 55449-4787  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05593**  
 Amount of Each Receipt this Period 100.00

**B. MR. NELSON SCHAENEN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 56 MIDWOOD TERRACE  
 City MADISON State NJ Zip Code 07940-2735  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05594**  
 Amount of Each Receipt this Period 500.00

**C. MRS. JEAN SCHAER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 45 FULLIN ROAD  
 City NORWALK State CT Zip Code 06851-3416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05595**  
 Amount of Each Receipt this Period 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1970 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JUNE P. SCHAFFER**  
Full Name (Last, First, Middle Initial)

Mailing Address 260 ROYAL STREET

City MCDONOUGH State GA Zip Code 30253-7601

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05596**

Amount of Each Receipt this Period  
 225.00

**B. MR. HAL A. SCHAGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2115 TOPEKA CIRCLE

City GRAND ISLAND State NE Zip Code 68803-2257

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation TITLE INSURANCE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05597**

Amount of Each Receipt this Period  
 225.00

**C. MR. JORDAN T. SCHANCK**  
Full Name (Last, First, Middle Initial)

Mailing Address 38 CROVDON LANE

City OAK BROOK State IL Zip Code 60523-2325

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05598**

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	950.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1971 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. NEIL D. SCHAPPERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1600 GLENARM PLACE  
 APARTMENT 2503  
 City DENVER State CO Zip Code 80202-4338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CATHEDRAL ENERGY SERVICES Occupation GENERAL MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05599**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. NEIL D. SCHAPPERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1600 GLENARM PLACE  
 APARTMENT 2503  
 City DENVER State CO Zip Code 80202-4338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CATHEDRAL ENERGY SERVICES Occupation GENERAL MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05600**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. KAREN J. SCHARBAUER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5610 CAMDEN  
 City MIDLAND State TX Zip Code 79707-5040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05601**  
 Amount of Each Receipt this Period  
 1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1720.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1972 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE H. SCHARDIEN III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 516 RIVERWOOD AVENUE  
 City State Zip Code  
 POINT PLEASANT BORO NJ 08742-2715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 311.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05602**  
 Amount of Each Receipt this Period  
 235.00

**B. MR. GEORGE H. SCHARDIEN III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 516 RIVERWOOD AVENUE  
 City State Zip Code  
 POINT PLEASANT BORO NJ 08742-2715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 311.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05603**  
 Amount of Each Receipt this Period  
 21.00

**C. MR. JESSE P. SCHAUDIES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8601 CYPRESS LAKES DRIVE  
 UNIT 304A  
 City State Zip Code  
 RALEIGH NC 27615-2123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05604**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 356.00  
**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 1973 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. STELLA SHAW SCHEER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1533 RANGE AVENUE  
 APARTMENT 1  
 City SANTA ROSA State CA Zip Code 95401-4227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05605**  
 Amount of Each Receipt this Period  
 400.00

**B. MS. STELLA SHAW SCHEER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1533 RANGE AVENUE  
 APARTMENT 1  
 City SANTA ROSA State CA Zip Code 95401-4227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05606**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. DOLORSIS R. SCHEETZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4612 HAWKHAVEN LANE  
 City AUSTIN State TX Zip Code 78727-5801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05607**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	620.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1974 OF 2949  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES M. SCHELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1050 5TH AVENUE  
APT. 8D

City NEW YORK State NY Zip Code 10028-0110

FEC ID number of contributing federal political committee. **C**

Name of Employer SKADDEN, ARPS ET. AL. Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05608**

Amount of Each Receipt this Period  
1000.00

**B. MR. JOHN A. SCHELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 5112 PINE RIVER TRAIL

City CASTLE ROCK State CO Zip Code 80108-8839

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
370.00

Date of Receipt  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05609**

Amount of Each Receipt this Period  
185.00

**C. MR. LOUIS J. SCHELTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 8119 ELMART COURT

City NORTH CHESTERFIELD State VA Zip Code 23235-5515

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05610**

Amount of Each Receipt this Period  
111.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1296.00

**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 1975 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DANIEL SCHERDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 950TH TRANS CO  
 UNIT 22419 ATTN GAFSC  
 City APO State AE Zip Code 09069-2419  
 Name of Employer USAF Occupation OFFICER  
 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  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05611**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. THOMAS R. SCHERSCHEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6935 W. 00 NS  
 City KOKOMO State IN Zip Code 46901-8809  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 990.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05612**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. ROBERT J. SCHIER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1471 LANCE DRIVE  
 City TUSTIN State CA Zip Code 92780-4544  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05613**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	510.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1976 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALBERT F. SCHIFFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13814 S. PFLUMM ROAD  
 APARTMENT 109  
 City OLATHE State KS Zip Code 66062-5895  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 446.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05614**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. ALBERT F. SCHIFFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13814 S. PFLUMM ROAD  
 APARTMENT 109  
 City OLATHE State KS Zip Code 66062-5895  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 446.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05615**  
 Amount of Each Receipt this Period  
 10.00

**C. MR. ALBERT F. SCHIFFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13814 S. PFLUMM ROAD  
 APARTMENT 109  
 City OLATHE State KS Zip Code 66062-5895  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 446.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05616**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	85.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1977 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. ALBERT F. SCHIFFER</b>		Date of Receipt 03 / 21 / 2014 <b>Transaction ID : 2014M04L11AI05617</b>
Mailing Address 13814 S. PFLUMM ROAD APARTMENT 109		Amount of Each Receipt this Period 15.00
City OLATHE	State KS	
Zip Code 66062-5895		Aggregate Year-to-Date ▼ 446.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. MR. ALBERT F. SCHIFFER</b>		Date of Receipt 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI05618</b>
Mailing Address 13814 S. PFLUMM ROAD APARTMENT 109		Amount of Each Receipt this Period 21.00
City OLATHE	State KS	
Zip Code 66062-5895		Aggregate Year-to-Date ▼ 446.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. MR. ALBERT F. SCHIFFER</b>		Date of Receipt 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI05619</b>
Mailing Address 13814 S. PFLUMM ROAD APARTMENT 109		Amount of Each Receipt this Period 10.00
City OLATHE	State KS	
Zip Code 66062-5895		Aggregate Year-to-Date ▼ 446.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....	46.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1978 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HENRY MARTIN SCHILLER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7500 DON ROAD  
 City MINERAL State VA Zip Code 23117-9682  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05620**  
 Amount of Each Receipt this Period  
 550.00

**B. WILLIAM L. SCHILLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9982 GAZEBO CIRCLE  
 City DALLAS State TX Zip Code 75243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05621**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. WARREN W. SCHIMUNEK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3508 BEARD CURVE  
 City MINNEAPOLIS State MN Zip Code 55431-2724  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05622**  
 Amount of Each Receipt this Period  
 221.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1021.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1979 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. JACK W. SCHINDLER</b>		Date of Receipt
Mailing Address 16282 ROAD 20		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code FORT JENNINGS OH 45844-9700		<b>Transaction ID : 2014M04L11AI05623</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="70.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="365.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. JACK W. SCHINDLER</b>		Date of Receipt
Mailing Address 16282 ROAD 20		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code FORT JENNINGS OH 45844-9700		<b>Transaction ID : 2014M04L11AI05624</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="365.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MS. SHARON LEE SCHISLER</b>		Date of Receipt
Mailing Address 2521 GLEN EAGLE DRIVE		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City State Zip Code BAY CITY MI 48706-9316		<b>Transaction ID : 2014M04L11AI05625</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="120.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="290.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="290.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 1980 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SHARON LEE SCHISLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2521 GLEN EAGLE DRIVE  
 City BAY CITY State MI Zip Code 48706-9316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05626**  
 Amount of Each Receipt this Period 50.00

**B. MRS. JANE SCHISLER MOSELEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4410 ANDES DRIVE  
 City FAIRFAX State VA Zip Code 22030-5388  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05627**  
 Amount of Each Receipt this Period 200.00

**C. MR. ROBERT L. SCHLABACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 311746  
 City NEW BRAUNFELS State TX Zip Code 78131-1746  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PROPERTY TAX ALLIANCE Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05628**  
 Amount of Each Receipt this Period 225.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	475.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1981 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT L. SCHLABACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 311746  
 City NEW BRAUNFELS State TX Zip Code 78131-1746  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PROPERTY TAX ALLIANCE Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05629**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. STEVEN SCHLEIDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 401 EAST 74TH STREET  
 City NEW YORK State NY Zip Code 10021-3919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer METROPOLITAN VALUATION SERVICES Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05630**  
 Amount of Each Receipt this Period  
 15000.00

**C. MR. MELVIN C. SCHLENDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1039 W. 31ST STREET N.  
 City WICHITA State KS Zip Code 67204-4328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05631**  
 Amount of Each Receipt this Period  
 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15155.00  
**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 1982 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MELVIN C. SCHLENDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1039 W. 31ST STREET N.

City WICHITA State KS Zip Code 67204-4328

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05632**

Amount of Each Receipt this Period  
 56.00

**B. MR. BILL SCHMIDT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1034 GRANDIN RIDGE DRIVE

City CINCINNATI State OH Zip Code 45208-3420

FEC ID number of contributing federal political committee. **C**

Name of Employer SIGNATURE ENGINES Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05632**

Amount of Each Receipt this Period  
 250.00

**C. MR. DOUGLAS SCHMIDT**  
Full Name (Last, First, Middle Initial)

Mailing Address 39 JOHN DAVES LANE

City HUNTINGTON State NY Zip Code 11743-1838

FEC ID number of contributing federal political committee. **C**

Name of Employer C.B.S. CORP. Occupation TECHNOLOGY EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05634**

Amount of Each Receipt this Period  
 111.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	417.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1983 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GENE SCHMIDT**  
Full Name (Last, First, Middle Initial)

Mailing Address 10453 RUFFNER AVENUE

City GRANADA HILLS State CA Zip Code 91344-6547

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05635**

Amount of Each Receipt this Period  
 121.00

**B. MS. KAREN T. SCHMIDT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1919 INDIAN TRAILS COURT

City LAKELAND State FL Zip Code 33813-3779

FEC ID number of contributing federal political committee. **C**

Name of Employer CAM CONNECTIONS INC Occupation HR MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05636**

Amount of Each Receipt this Period  
 500.00

**C. MR. ROGER SCHMIDT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1310 BROADWAY

City WHEATON State MN Zip Code 56296-1037

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05637**

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1621.00

**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 1984 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SANDRA SCHMIDT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1538 EASTRIDGE AVENUE

City SEWARD State NE Zip Code 68434-1148

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05638**

Amount of Each Receipt this Period  
101.00

**B. MR. GEORGE J. SCHMIEDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4327 ORTEGA FARMS CIRCLE

City JACKSONVILLE State FL Zip Code 32210-7424

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
03 / 27 / 2014  
**Transaction ID : 2014M04L11AI05639**

Amount of Each Receipt this Period  
500.00

**C. MR. JOE SCHMIEDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4154 CHEW STREET

City ALLENTOWN State PA Zip Code 18104-5131

FEC ID number of contributing federal political committee. **C**

Name of Employer AIR PRODUCTS Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05640**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 701.00

**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 1985 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY SCHMIEDING**  
Full Name (Last, First, Middle Initial)

Mailing Address 1930 TUCKAWAY DRIVE

City BLOOMFIELD HILLS State MI Zip Code 48302-1778

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05641**

Amount of Each Receipt this Period  
 120.00

**B. MR. RALPH G. SCHMITT**  
Full Name (Last, First, Middle Initial)

Mailing Address 182 BURNT HICKORY WAY

City FORTSON State GA Zip Code 31808-4468

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05642**

Amount of Each Receipt this Period  
 55.00

**C. WILLIAM J. SCHMUHL, JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 1421 HONAN DRIVE

City SOUTH BEND State IN Zip Code 46614-2164

FEC ID number of contributing federal political committee. **C**

Name of Employer U OF NOTRE DAME Occupation ACADEMIC

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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05643**

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 475.00

**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 1986 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. CARL SCHMULEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 217 SHASTA DRIVE  
 City HOUSTON State TX Zip Code 77024-6915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF - EMPLOYED Occupation MEDICAL DOCTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05644**  
 Amount of Each Receipt this Period  
 201.00

**B. MR. WILLIAM G. SCHMUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7011 PORTMARNOCK PLACE  
 City LAKEWOOD RANCH State FL Zip Code 34202-2594  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05645**  
 Amount of Each Receipt this Period  
 200.00

**C. MS. ALICE SCHNECKENBURGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 280  
 City SHERMAN State CT Zip Code 06784-0280  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 321.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05646**  
 Amount of Each Receipt this Period  
 151.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	552.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1987 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. RANDY SCHNEEWIND</b>		Date of Receipt
Mailing Address 118 PEAVEY CIRCLE		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
CHASKA	MN	55318-2347
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI05647</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	CONSTRUCTION	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. ARNOLD C. SCHNEIDER III</b>		Date of Receipt
Mailing Address 826 TURNBRIDGE ROAD		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
WAYNE	PA	19087-2070
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI05648</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SCHNEIDER CAPITAL MANAGEMENT	PORTFOLIO MANAGER	<input type="text" value="9900.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="9900.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. JAMES SCHNEIDER</b>		Date of Receipt
Mailing Address 3580 N.W. 85TH TERRACE		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
OCALA	FL	34482-3877
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI05649</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SARATOGA CHIPS, LLC	PRESIDENT	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="10400.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 1988 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOSEPH C. SCHNEIDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 34 TORREY PINES DRIVE  
 City HAZLE TOWNSHIP State PA Zip Code 18202-9588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05650**  
 Amount of Each Receipt this Period 210.00

**B. MR. JOSEPH C. SCHNEIDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 34 TORREY PINES DRIVE  
 City HAZLE TOWNSHIP State PA Zip Code 18202-9588  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI05651**  
 Amount of Each Receipt this Period 30.00

**C. MR. ROBERT L. SCHNEIDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14392 WILLOW LN  
 City TUSTIN State CA Zip Code 92780-2345  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05652**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 490.00  
**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 1989 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEVEN P. SCHNEIDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1338 YORKSHIRE ROAD  
 City State Zip Code  
 GROSSE POINTE PARK MI 48230-1108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HONIGMAN, ET AL ATTORNEY  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05653**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. BRUCE R. SCHNITTGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3539 NE 41ST STREET  
 City State Zip Code  
 HIGH SPRINGS FL 32643-5675  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05654**  
 Amount of Each Receipt this Period  
 110.00

**C. MR. BRUCE R. SCHNITTGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3539 NE 41ST STREET  
 City State Zip Code  
 HIGH SPRINGS FL 32643-5675  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05655**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	410.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1990 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. LEE E. SCHOEFLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 915  
 City BROKEN ARROW State OK Zip Code 74013-0915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05656**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. FRED E. SCHOEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32341 DOVER AVENUE  
 City WARREN State MI Zip Code 48088-6904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05657**  
 Amount of Each Receipt this Period  
 102.00

**C. MR. TIMOTHY J. SCHOLTING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 513 MAIN STREET  
 City LOUISVILLE State NE Zip Code 68037-6063  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05658**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	852.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1991 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DOUGLAS W. SCHOMBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5808 381ST AVENUE  
 City BURLINGTON State WI Zip Code 53105-8895  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05659**  
 Amount of Each Receipt this Period 250.00

**B. MRS. JOAN SCHONHOLTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32 BEMAN WOODS COURT  
 City POTOMAC State MD Zip Code 20854-5481  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1417.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05660**  
 Amount of Each Receipt this Period 110.00

**C. MRS. JOAN SCHONHOLTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32 BEMAN WOODS COURT  
 City POTOMAC State MD Zip Code 20854-5481  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1417.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05661**  
 Amount of Each Receipt this Period 112.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	472.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1992 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JOAN SCHONHOLTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32 BEMAN WOODS COURT  
 City POTOMAC State MD Zip Code 20854-5481  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1417.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05662**  
 Amount of Each Receipt this Period 50.00

**B. MR. JOHN BLAND SCHOOLLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3665 FIELDCREST COURT  
 City THOUSAND OAKS State CA Zip Code 91360-6208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05663**  
 Amount of Each Receipt this Period 500.00

**C. VADM. ROBERT F. SCHOULTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19231 NO 88TH AVE  
 City PEORIA State AZ Zip Code 85382-8543  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05664**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00  
**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 1993 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. VADM. ROBERT F. SCHOULTZ**

Mailing Address 19231 NO 88TH AVE

City State Zip Code  
PEORIA AZ 85382-8543

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05665**

Amount of Each Receipt this Period  
60.00

Full Name (Last, First, Middle Initial)  
**B. VADM. ROBERT F. SCHOULTZ**

Mailing Address 19231 NO 88TH AVE

City State Zip Code  
PEORIA AZ 85382-8543

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05666**

Amount of Each Receipt this Period  
10.00

Full Name (Last, First, Middle Initial)  
**C. MAJ. LAWRENCE L. SCHRANK U.S.A. (RE**

Mailing Address 7081 F.M. 932

City State Zip Code  
HAMILTON TX 76531-3163

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05667**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 120.00

**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 1994 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SETH H. SCHREIBER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27 MAPLE AVENUE  
 City CEDARHURST State NY Zip Code 11516-2221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer A.H. SCHREIBER CO. Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05668**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. SETH H. SCHREIBER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27 MAPLE AVENUE  
 City CEDARHURST State NY Zip Code 11516-2221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer A.H. SCHREIBER CO. Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05669**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. NANCY Z. SCHREYER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 126 KENT LANE  
 City NASHUA State NH Zip Code 03062-2860  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05670**  
 Amount of Each Receipt this Period  
 1100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 1995 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DONNA J. SCHROCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2421 GOLFSIDE DRIVE  
 City NAPLES State FL Zip Code 34110-7000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 471.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05671**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. DONNA J. SCHROCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2421 GOLFSIDE DRIVE  
 City NAPLES State FL Zip Code 34110-7000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 471.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05672**  
 Amount of Each Receipt this Period  
 51.00

**C. MR. HERMAN SCHROEDEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5716 N.W. 93RD STREET  
 City JOHNSTON State IA Zip Code 50131-2791  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05673**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 251.00  
**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 1996 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HERMAN SCHROEDEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5716 N.W. 93RD STREET  
 City JOHNSTON State IA Zip Code 50131-2791  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05674**  
 Amount of Each Receipt this Period 55.00

**B. MR. BUD C. SCHROEDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13763 BRIARWOOD LANE  
 City ROSCOE State IL Zip Code 61073-8456  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05675**  
 Amount of Each Receipt this Period 50.00

**C. MR. BUD C. SCHROEDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13763 BRIARWOOD LANE  
 City ROSCOE State IL Zip Code 61073-8456  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05676**  
 Amount of Each Receipt this Period 40.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 145.00  
**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 1997 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BUD C. SCHROEDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13763 BRIARWOOD LANE  
 City ROSCOE State IL Zip Code 61073-8456  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05677**  
 Amount of Each Receipt this Period  
 41.00

**B. MR. DENNIS D. SCHROEDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6250 COUNTY ROAD 16  
 City MC COMB State OH Zip Code 45858-9504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05678**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. JAMES SCHROEDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6032 SHORE DRIVE  
 City MADISON State OH Zip Code 44057-1853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05679**  
 Amount of Each Receipt this Period  
 26.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 117.00  
**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 1998 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. KENNETH L. SCHROEDER</b>		Date of Receipt
Mailing Address 14545 MANUELLA RD		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
LOS ALTOS HILLS	CA	94022-2024
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI05680</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="9500.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="9500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. JOHN H. SCHROM</b>		Date of Receipt
Mailing Address P.O. BOX 144 619 SOUTH SE STREET		<input type="text" value="03"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City	State	Zip Code
GRANGEVILLE	ID	83530-0144
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI05681</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="215.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. JOHN H. SCHROM</b>		Date of Receipt
Mailing Address P.O. BOX 144 619 SOUTH SE STREET		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
GRANGEVILLE	ID	83530-0144
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2014M04L11AI05682</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="215.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="9500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 1999 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN H. SCHROM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 144  
 619 SOUTH SE STREET  
 City GRANGEVILLE State ID Zip Code 83530-0144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05683**  
 Amount of Each Receipt this Period  
 30.00

**B. MR. JOHN H. SCHROM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 144  
 619 SOUTH SE STREET  
 City GRANGEVILLE State ID Zip Code 83530-0144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05684**  
 Amount of Each Receipt this Period  
 31.00

**C. MR. CHARLES M. SCHRON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 50485  
 City PHOENIX State AZ Zip Code 85076-0485  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SOUTHEAST VALLEY GASTROENTEROLOG Occupation PHYSICIAN  
 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  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05685**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 361.00  
**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 2000 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. MARLENE J. SCHUBE</b>		Date of Receipt 03 / 12 / 2014 <b>Transaction ID : 2014M04L11AI05686</b>
Mailing Address 7341 WATERPOINT LANE		Amount of Each Receipt this Period 400.00
City CINCINNATI	State OH	Zip Code 45255-3925
FEC ID number of contributing federal political committee. C		
Name of Employer DUALITE, INC.	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. MARLENE J. SCHUBE</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI05687</b>
Mailing Address 7341 WATERPOINT LANE		Amount of Each Receipt this Period 1.00
City CINCINNATI	State OH	Zip Code 45255-3925
FEC ID number of contributing federal political committee. C		
Name of Employer DUALITE, INC.	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 401.00	

Full Name (Last, First, Middle Initial) <b>C. DR. MARIE-LUISE SCHUBERT KALSI</b>		Date of Receipt 03 / 17 / 2014 <b>Transaction ID : 2014M04L11AI05688</b>
Mailing Address 13307 CAROUSEL COURT		Amount of Each Receipt this Period 100.00
City HOUSTON	State TX	Zip Code 77041-6572
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	501.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2001 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES W. SCHUDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 N. TAYLOR STREET  
 APARTMENT 1426  
 City ARLINGTON State VA Zip Code 22203-1873  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05689**  
 Amount of Each Receipt this Period 100.00

**B. MR. WILLIAM C. SCHUETTLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2050 KING AVENUE  
 City POTTSVILLE State PA Zip Code 17901-1916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05690**  
 Amount of Each Receipt this Period 50.00

**C. MR. WILLIAM C. SCHUETTLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2050 KING AVENUE  
 City POTTSVILLE State PA Zip Code 17901-1916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05691**  
 Amount of Each Receipt this Period 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2002 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM C. SCHUETTLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2050 KING AVENUE  
 City POTTSVILLE State PA Zip Code 17901-1916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 203.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05692**  
 Amount of Each Receipt this Period 53.00

**B. MS. BARBARA J. SCHULER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 682 CHESTERFIELD ROAD  
 City BOGART State GA Zip Code 30622-6817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05693**  
 Amount of Each Receipt this Period 70.00

**C. MS. BARBARA J. SCHULER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 682 CHESTERFIELD ROAD  
 City BOGART State GA Zip Code 30622-6817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05694**  
 Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 148.00  
**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 2003 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN H. SCHULER**  
Full Name (Last, First, Middle Initial)

Mailing Address 425 WORTH AVENUE  
APARTMENT 2F

City PALM BEACH State FL Zip Code 33480-6523

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05695**

Amount of Each Receipt this Period  
201.00

**B. MRS. SANDRA K. SCHULTE**  
Full Name (Last, First, Middle Initial)

Mailing Address 5787 MEADOW POND COURT

City SUMMERFIELD State NC Zip Code 27358-9178

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05696**

Amount of Each Receipt this Period  
250.00

**C. MRS. MARIA-CECILIA CECILIA SCHULTZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 929 HICKORY RUN LANE

City GREAT FALLS State VA Zip Code 22066-1904

FEC ID number of contributing federal political committee. **C**

Name of Employer IIMC Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05697**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 701.00

**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 2004 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HARRY RICHARD SCHUMACHER**  
Full Name (Last, First, Middle Initial)

Mailing Address 47 E. 88TH STREET  
APARTMENT 14A

City NEW YORK State NY Zip Code 10128-1152

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 910.00

Date of Receipt  
03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05698**

Amount of Each Receipt this Period  
100.00

**B. MR. HARRY RICHARD SCHUMACHER**  
Full Name (Last, First, Middle Initial)

Mailing Address 47 E. 88TH STREET  
APARTMENT 14A

City NEW YORK State NY Zip Code 10128-1152

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 910.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05699**

Amount of Each Receipt this Period  
200.00

**C. MR. HARRY RICHARD SCHUMACHER**  
Full Name (Last, First, Middle Initial)

Mailing Address 47 E. 88TH STREET  
APARTMENT 14A

City NEW YORK State NY Zip Code 10128-1152

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 910.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05700**

Amount of Each Receipt this Period  
50.00

**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 2005 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JANICE MARIE SCHUMACHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 S. 6TH STREET  
 City CLINTON State OK Zip Code 73601-4616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WAL MART Occupation GREETER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 639.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05701**  
 Amount of Each Receipt this Period  
 275.00

**B. MR. PAUL W. J. SCHUMACHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2226 GRAVEL HILL ROAD  
 City SELMER State TN Zip Code 38375-6656  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05702**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. LAWRENCE F. SCHUMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 889 RIVERSIDE DRIVE  
 APARTMENT 102  
 City FORT LAUDERDALE State FL Zip Code 33312-7655  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI05703**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 475.00  
**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 2006 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM H. SCHUMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 N. GREEN BAY ROAD  
 City LAKE FOREST State IL Zip Code 60045-1709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05704**  
 Amount of Each Receipt this Period 500.00

**B. MRS. G. SUE SCHUNEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8510 E. 29TH N. #508  
 City WICHITA State KS Zip Code 67226-6609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05705**  
 Amount of Each Receipt this Period 250.00

**C. MR. WAYNE M. SCHUTTE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4718 WEST BLVD.  
 City NAPLES State FL Zip Code 34103-3050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05706**  
 Amount of Each Receipt this Period 51.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 801.00  
**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 2007 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT L. SCHUTZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 16172 GRAND CYPRESS DRIVE

City NOBLESVILLE State IN Zip Code 46060-4469

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05707**

Amount of Each Receipt this Period  
 50.00

**B. MR. ROBERT L. SCHUTZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 16172 GRAND CYPRESS DRIVE

City NOBLESVILLE State IN Zip Code 46060-4469

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05708**

Amount of Each Receipt this Period  
 101.00

**C. MRS. JUDITH SCHUYLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 940 ASTERN WAY  
UNIT 502

City ANNAPOLIS State MD Zip Code 21401-7504

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05709**

Amount of Each Receipt this Period  
 220.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 371.00

**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 2008 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. STEFAN K. SCHWABE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1550 EAST GUDY DRIVE  
 City State Zip Code  
 ROCKVILLE MD 20850-1339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SUPERNUS PHARMACEUTICALS EXECUTIVE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05710**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. DONALD L. SCHWARTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 191 PARK AVENUE  
 City State Zip Code  
 GLENCOE IL 60022-1351  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 UNGARETTI & HARRIS L.L.P. LAWYER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05711**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. DONALD L. SCHWARTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 191 PARK AVENUE  
 City State Zip Code  
 GLENCOE IL 60022-1351  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 UNGARETTI & HARRIS L.L.P. LAWYER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI05712**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00  
**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 2009 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STEPHEN H. SCHWARTZ**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2143 E. 35TH STREET

City BROOKLYN	State NY	Zip Code 11234-4904
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
407.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : 2014M04L11AI05713**

Amount of Each Receipt this Period  
192.00

**B. MR. W. W. SCHWEIKERT**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4908 FRANCIS LEWIS BLVD.

City OAKLAND GARDENS	State NY	Zip Code 11364-1053
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer UNIVERSAL KNITTING MACHINE	Occupation MECHANICAL ENGINEER
--	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI05714**

Amount of Each Receipt this Period  
251.00

**C. MR. CLIFFORD H. SCHWIETER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4199 RESERVES PL

City MASON	State OH	Zip Code 45040-5507
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2014

**Transaction ID : 2014M04L11AI05715**

Amount of Each Receipt this Period  
330.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	773.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2010 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN SCHWIKERT SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 348 WILD PLUM LANE  
 City LAS VEGAS State NV Zip Code 89107-2823  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05716**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. JOHN SCHWIKERT SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 348 WILD PLUM LANE  
 City LAS VEGAS State NV Zip Code 89107-2823  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05717**  
 Amount of Each Receipt this Period  
 301.00

**C. MRS. BARBARA J. SCOLARO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2547 WALTERS AVE.  
 City NORTHBROOK State IL Zip Code 60062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05718**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 701.00  
**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 2011 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. BARBARA J. SCOLARO**

Mailing Address 2547 WALTERS AVE.

City NORTHBROOK      State IL      Zip Code 60062

FEC ID number of contributing federal political committee. **C**

Name of Employer: **HOMEMAKER**      Occupation: **HOMEMAKER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 26 / 2014**  
**Transaction ID : 2014M04L11AI05719**

Amount of Each Receipt this Period  
**1.00**

Full Name (Last, First, Middle Initial)  
**B. MS. MILDRED SCORE**

Mailing Address 3328 CUMMING AVENUE

City SUPERIOR      State WI      Zip Code 54880-5553

FEC ID number of contributing federal political committee. **C**

Name of Employer: **RETIRED**      Occupation: **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 06 / 2014**  
**Transaction ID : 2014M04L11AI05720**

Amount of Each Receipt this Period  
**125.00**

Full Name (Last, First, Middle Initial)  
**C. MR. BRUCE M. SCOTT**

Mailing Address 2816 HUNTER MILL ROAD

City OAKTON      State VA      Zip Code 22124-1795

FEC ID number of contributing federal political committee. **C**

Name of Employer: **SCOTT-LONG CONSTRUCTION, INC.**      Occupation: **CONTRACTOR**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2014**  
**Transaction ID : 2014M04L11AI05721**

Amount of Each Receipt this Period  
**120.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **246.00**

**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 2012 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CRAIG C. SCOTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 730  
 City CAPTIVA State FL Zip Code 33924-0730  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05722**  
 Amount of Each Receipt this Period  
 500.00

**B. MS. CYNTHIA S. SCOTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2204 CREEKDALE DRIVE  
 City DENTON State TX Zip Code 76210-3628  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer F.E.M.A. Occupation DISASTER RESERVIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05723**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. CYNTHIA S. SCOTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2204 CREEKDALE DRIVE  
 City DENTON State TX Zip Code 76210-3628  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer F.E.M.A. Occupation DISASTER RESERVIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05724**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2013 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARSHA LYNN SCOTT**  
Full Name (Last, First, Middle Initial)

Mailing Address 3706 THUNDERBIRD DRIVE

City HAYS State KS Zip Code 67601-1410

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05725**

Amount of Each Receipt this Period  
 101.00

**B. MRS. MARY SCOTT**  
Full Name (Last, First, Middle Initial)

Mailing Address 3931 E. PEACH HOLLOW CIRCLE

City PEARLAND State TX Zip Code 77584-4045

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05726**

Amount of Each Receipt this Period  
 250.00

**C. MR. MATTHEW SCOTT**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 14TH STREET  
PH 1

City HOBOKEN State NJ Zip Code 07030-6790

FEC ID number of contributing federal political committee. **C**

Name of Employer BANK OF AMERICA/ MERRILL LYNCH Occupation TRADER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05727**

Amount of Each Receipt this Period  
 335.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	686.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2014 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. ROBERT L. SCOTT</b>		Date of Receipt MM / DD / YYYY 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI05728</b>
Mailing Address 12601 DUTCH FOREST PLACE		Amount of Each Receipt this Period 250.00
City EDMOND	State OK	Zip Code 73013-7539
FEC ID number of contributing federal political committee. C	Name of Employer SELF-EMPLOYED	Occupation GEOLOGIST
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>B. MR. RUSSELL A. SCOTT</b>		Date of Receipt MM / DD / YYYY 03 / 04 / 2014 <b>Transaction ID : 2014M04L11AI05729</b>
Mailing Address 460 SIVLEY ROAD APARTMENT 105		Amount of Each Receipt this Period 60.00
City HOPKINSVILLE	State KY	Zip Code 42240-7967
FEC ID number of contributing federal political committee. C	Name of Employer CRACKE BARREL RESTAURANT	Occupation COOK/HOST
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) <b>C. MR. RUSSELL A. SCOTT</b>		Date of Receipt MM / DD / YYYY 03 / 04 / 2014 <b>Transaction ID : 2014M04L11AI05730</b>
Mailing Address 460 SIVLEY ROAD APARTMENT 105		Amount of Each Receipt this Period 70.00
City HOPKINSVILLE	State KY	Zip Code 42240-7967
FEC ID number of contributing federal political committee. C	Name of Employer CRACKE BARREL RESTAURANT	Occupation COOK/HOST
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	380.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2015 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. RUSSELL A. SCOTT</b>		Date of Receipt
Mailing Address 460 SIVLEY ROAD APARTMENT 105		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
HOPKINSVILLE	KY	42240-7967
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI05731</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="35.00"/>
Name of Employer	Occupation	
CRACKE BARREL RESTAURANT	COOK/HOST	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="205.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. RUSSELL A. SCOTT</b>		Date of Receipt
Mailing Address 460 SIVLEY ROAD APARTMENT 105		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
HOPKINSVILLE	KY	42240-7967
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI05732</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	
CRACKE BARREL RESTAURANT	COOK/HOST	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="205.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. THOMAS A. SCOTT</b>		Date of Receipt
Mailing Address 22816 GARY LANE		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAINT CLAIR SHORES	MI	48080-2512
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI05733</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="365.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 2016 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. LUCRETIA SCUDDER</b>		Date of Receipt
Mailing Address 1414 MARYLAND DR		M M M / D D D / Y Y Y Y Y Y 03 / 13 / 2014
City	State	Zip Code
LA JOLLA	CA	92037
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI05734</b>
Name of Employer ARTIST TAKING LICENES		Amount of Each Receipt this Period
Occupation ARTIST		290.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	290.00	

Full Name (Last, First, Middle Initial) <b>B. MR. WILLIAM P. SCULLY</b>		Date of Receipt
Mailing Address 771 MANATEE COVE		M M M / D D D / Y Y Y Y Y Y 03 / 04 / 2014
City	State	Zip Code
VERO BEACH	FL	32963-3730
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI05735</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		3000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	8500.00	

Full Name (Last, First, Middle Initial) <b>C. MR. WILLIAM P. SCULLY</b>		Date of Receipt
Mailing Address 771 MANATEE COVE		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City	State	Zip Code
VERO BEACH	FL	32963-3730
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI05736</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		2500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	8500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5790.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2017 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT G. SEABURY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 SHEPHERDS COURT

City State Zip Code  
WICHITA FALLS TX 76308-5451

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED REAL ESTATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05737**

Amount of Each Receipt this Period  
120.00

**B. MR. ROBERT G. SEABURY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 SHEPHERDS COURT

City State Zip Code  
WICHITA FALLS TX 76308-5451

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED REAL ESTATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2014  
**Transaction ID : 2014M04L11AI05738**

Amount of Each Receipt this Period  
100.00

**C. MR. ROBERT E. SEANEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 3316 N.E. 116TH STREET

City State Zip Code  
VANCOUVER WA 98686-3946

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05739**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	320.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2018 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT E. SEANEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3316 N.E. 116TH STREET  
 City VANCOUVER State WA Zip Code 98686-3946  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05740**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. SCOTT B. SEATON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9684 N. 109TH AVENUE  
 City OMAHA State NE Zip Code 68142-1124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05741**  
 Amount of Each Receipt this Period  
 220.00

**C. MR. SCOTT BRADLEY SEATON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14349 HAMILTON STREET  
 City OMAHA State NE Zip Code 68154-5116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SCOTT ENTERPRISES, INC. Occupation PRESIDENT & C.E.O.  
 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  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05742**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	840.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2019 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. JOSEPH SEAY</b>		Date of Receipt										
Mailing Address 4604 W. TECUMSEH ROAD P.O. BOX 721076		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>20</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	20	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	20	/	2014								
City	State	Zip Code										
NORMAN	OK	73072-1781										
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI05743										
<input type="checkbox"/> C		Amount of Each Receipt this Period										
		250.00										
Name of Employer	Occupation											
SELF-EMPLOYED	DOCTOR											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	250.00											

Full Name (Last, First, Middle Initial) <b>B. MR. NELSON SEESE</b>		Date of Receipt										
Mailing Address 9 WILL LANE		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>07</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	07	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	07	/	2014								
City	State	Zip Code										
BRIDGEWATER	VA	22812-1765										
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI05744										
<input type="checkbox"/> C		Amount of Each Receipt this Period										
		200.00										
Name of Employer	Occupation											
RETIRED	RETIRED											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	500.00											

Full Name (Last, First, Middle Initial) <b>C. MR. NELSON SEESE</b>		Date of Receipt										
Mailing Address 9 WILL LANE		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>18</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	18	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	18	/	2014								
City	State	Zip Code										
BRIDGEWATER	VA	22812-1765										
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI05745										
<input type="checkbox"/> C		Amount of Each Receipt this Period										
		100.00										
Name of Employer	Occupation											
RETIRED	RETIRED											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	500.00											

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2020 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. DOROTHY M. SEGARS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1336 E. HECLA DRIVE  
 UNIT 320  
 City LOUISVILLE State CO Zip Code 80027-3813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 332.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05746**  
 Amount of Each Receipt this Period 112.00

**B. DR. KELLY S. SEGARS SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 52 COUNTY ROAD 150  
 City IUKA State MS Zip Code 38852-8832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FIRST AMERICAN NATIONAL BANK Occupation FOUNDER/CHAIRMAN & PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05747**  
 Amount of Each Receipt this Period 50.00

**C. DR. KELLY S. SEGARS SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 52 COUNTY ROAD 150  
 City IUKA State MS Zip Code 38852-8832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FIRST AMERICAN NATIONAL BANK Occupation FOUNDER/CHAIRMAN & PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05748**  
 Amount of Each Receipt this Period 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 217.00  
**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 2021 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARTHA SEGARS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 52 COUNTY ROAD 150  
 City IUKA State MS Zip Code 38852-7114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05749**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. MARTHA SEGARS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 52 COUNTY ROAD 150  
 City IUKA State MS Zip Code 38852-7114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05750**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. JAY SEIBEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5801 LAKE SHORE ESTATE LOT 27  
 City BEULAH State ND Zip Code 58523-9124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05751**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	401.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2022 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. CAROLYN H. SEIDLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20 STURBRIDGE LANE  
 City WAYNE State PA Zip Code 19087-5800  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05752**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. BETTY SEIFERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 189 NELSON ROAD  
 City YORKTOWN State TX Zip Code 78164  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05753**  
 Amount of Each Receipt this Period  
 110.00

**C. MR. BOB I. SELBY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1318 HORNCHURCH AVENUE  
 City CASPER State WY Zip Code 82609-4404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TOOLPUSHER SUPPLY Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05754**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1610.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2023 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ANN A. SELDEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 164 E. 72ND STREET  
APARTMENT 4A

City NEW YORK State NY Zip Code 10021-4363

FEC ID number of contributing federal political committee. **C**

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 10 / 2014**

**Transaction ID : 2014M04L11AI05755**

Amount of Each Receipt this Period  
**100.00**

**B. MRS. NANCY SELF**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O BOX 1

City LOWES State KY Zip Code 42061-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer: **REQUESTED** Occupation: **REQUESTED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**

**Transaction ID : 2014M04L11AI05756**

Amount of Each Receipt this Period  
**55.00**

**C. MR. PAUL SELF**  
Full Name (Last, First, Middle Initial)

Mailing Address 3368 CREIGHTON PLACE

City SANTA CLARA State CA Zip Code 95051-1502

FEC ID number of contributing federal political committee. **C**

Name of Employer: **MICREL, INC.** Occupation: **ENGINEER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 07 / 2014**

**Transaction ID : 2014M04L11AI05757**

Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>405.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2024 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. COURTNEY SELFRIDGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 BUCKEYE COURT  
 City Hillsborough State CA Zip Code 94010-6978  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **226.00**

Date of Receipt **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI05758**  
 Amount of Each Receipt this Period **151.00**

**B. MR. RICHARD K. SELFRIDGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 320 VALLEY VISTA DR  
 City Camarillo State CA Zip Code 93010-1634  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **700.00**

Date of Receipt **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI05759**  
 Amount of Each Receipt this Period **200.00**

**C. DR. TERRY A. SELLKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1701 LAKEVIEW TERRACE  
 City Libertyville State IL Zip Code 60048-4813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ORTHODONTIST  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 04 / 2014**  
**Transaction ID : 2014M04L11AI05760**  
 Amount of Each Receipt this Period **1000.00**

**SUBTOTAL** of Receipts This Page (optional)..... **1351.00**  
**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 2025 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. STUART SELTZER</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 06 / 2014 <b>Transaction ID : 2014M04L11AI05761</b>
Mailing Address 1130 ENGLEWOOD STREET		Amount of Each Receipt this Period 750.00
City PHILADELPHIA	State PA	Zip Code 19111-4235
FEC ID number of contributing federal political committee. C		
Name of Employer DISABLED	Occupation DISABLED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 771.00	

Full Name (Last, First, Middle Initial) <b>B. MR. STUART SELTZER</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2014 <b>Transaction ID : 2014M04L11AI05762</b>
Mailing Address 1130 ENGLEWOOD STREET		Amount of Each Receipt this Period 20.00
City PHILADELPHIA	State PA	Zip Code 19111-4235
FEC ID number of contributing federal political committee. C		
Name of Employer DISABLED	Occupation DISABLED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 771.00	

Full Name (Last, First, Middle Initial) <b>C. MR. STUART SELTZER</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 21 / 2014 <b>Transaction ID : 2014M04L11AI05763</b>
Mailing Address 1130 ENGLEWOOD STREET		Amount of Each Receipt this Period 1.00
City PHILADELPHIA	State PA	Zip Code 19111-4235
FEC ID number of contributing federal political committee. C		
Name of Employer DISABLED	Occupation DISABLED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 771.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	771.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2026 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID R. SELWAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 134 ARROYO DRIVE  
 City DANVILLE State CA Zip Code 94526-2717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05764**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. DAVID R. SELWAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 134 ARROYO DRIVE  
 City DANVILLE State CA Zip Code 94526-2717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05765**  
 Amount of Each Receipt this Period  
 25.00

**C. MR. DAVID R. SELWAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 134 ARROYO DRIVE  
 City DANVILLE State CA Zip Code 94526-2717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05766**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	195.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2027 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRENT W. SEMBLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5858 CENTRAL AVENUE  
 City SAINT PETERSBURG State FL Zip Code 33707-1708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SEMBLER COMPANY Occupation VICE CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5333.34

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05767**  
 Amount of Each Receipt this Period  
 2666.67

**B. MR. DENNIS RICHARD SEMKIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1350 MANRAD DRIVE  
 City WICKENBURG State AZ Zip Code 85390-1637  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05768**  
 Amount of Each Receipt this Period  
 121.00

**C. SOUTHY YUVARA SENGSY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 162 BROAD STREET APARTMENT 817  
 City PROVIDENCE State RI Zip Code 02903-4059  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05769**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2907.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2028 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BEVERLY SENNETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1565 WOODBRIDGE LAKES CIRCLE  
 City WEST PALM BEACH State FL Zip Code 33406-5642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KIRK FRIEDLAND, ATTORNEY Occupation LEGAL ASSISTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05770**  
 Amount of Each Receipt this Period 101.00

**B. MR. DONALD E. SETTER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 17TH STREET N.  
 City MOORHEAD State MN Zip Code 56560-2331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer D-S BEVERAGES, INC. Occupation SPECIAL PROJECTS MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI05771**  
 Amount of Each Receipt this Period 1.00

**C. MR. DONALD E. SETTER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 17TH STREET N.  
 City MOORHEAD State MN Zip Code 56560-2331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer D-S BEVERAGES, INC. Occupation SPECIAL PROJECTS MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05772**  
 Amount of Each Receipt this Period 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 222.00  
**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 2029 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD E. SETTER JR.**

Full Name (Last, First, Middle Initial)  
Mailing Address 201 17TH STREET N.

City MOORHEAD	State MN	Zip Code 56560-2331
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer D-S BEVERAGES, INC.	Occupation SPECIAL PROJECTS MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2014

**Transaction ID : 2014M04L11AI05773**

Amount of Each Receipt this Period  

1.00
------

**B. MR. DONALD E. SETTER JR.**

Full Name (Last, First, Middle Initial)  
Mailing Address 201 17TH STREET N.

City MOORHEAD	State MN	Zip Code 56560-2331
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer D-S BEVERAGES, INC.	Occupation SPECIAL PROJECTS MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2014

**Transaction ID : 2014M04L11AI05774**

Amount of Each Receipt this Period  

1.00
------

**C. MR. DONALD E. SETTER JR.**

Full Name (Last, First, Middle Initial)  
Mailing Address 201 17TH STREET N.

City MOORHEAD	State MN	Zip Code 56560-2331
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer D-S BEVERAGES, INC.	Occupation SPECIAL PROJECTS MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2014

**Transaction ID : 2014M04L11AI05775**

Amount of Each Receipt this Period  

5.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2030 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD E. SETTER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 17TH STREET N.  
 City MOORHEAD State MN Zip Code 56560-2331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer D-S BEVERAGES, INC. Occupation SPECIAL PROJECTS MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05776**  
 Amount of Each Receipt this Period  
 5.00

**B. MR. DONALD E. SETTER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 17TH STREET N.  
 City MOORHEAD State MN Zip Code 56560-2331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer D-S BEVERAGES, INC. Occupation SPECIAL PROJECTS MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05777**  
 Amount of Each Receipt this Period  
 5.00

**C. MR. DONALD E. SETTER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 17TH STREET N.  
 City MOORHEAD State MN Zip Code 56560-2331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer D-S BEVERAGES, INC. Occupation SPECIAL PROJECTS MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05778**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2031 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD E. SETTER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 17TH STREET N.  
 City MOORHEAD State MN Zip Code 56560-2331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer D-S BEVERAGES, INC. Occupation SPECIAL PROJECTS MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05779**  
 Amount of Each Receipt this Period 40.00

**B. MR. CAL SETZER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2351 VINEYARD ROAD  
 City ROSEVILLE State CA Zip Code 95747-9751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05780**  
 Amount of Each Receipt this Period 125.00

**C. MR. JOE M. SEWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5322 FAIRFIELD WEST  
 City DUNWOODY State GA Zip Code 30338-3227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05781**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 215.00  
**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 2032 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RALPH W. SEXTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1208  
 8005 37TH STREET  
 City VERO BEACH State FL Zip Code 32961-1208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05782**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. JOSEPH E. SHACKFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 5454  
 City INCLINE VILLAGE State NV Zip Code 89450-5454  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI05783**  
 Amount of Each Receipt this Period  
 1500.00

**C. MS. SUZANNE E. SHADE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1460 N. SANDBURG TERRACE #1708  
 City CHICAGO State IL Zip Code 60610-1536  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05784**  
 Amount of Each Receipt this Period  
 70.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1770.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2033 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SUZANNE E. SHADE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1460 N. SANDBURG TERRACE #1708

City CHICAGO	State IL	Zip Code 60610-1536
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
246.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05785**

Amount of Each Receipt this Period  
 1.00

**B. MR. MICHAEL B. SHAFFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3208 ARCHWAY

City IRVINE	State CA	Zip Code 92618-8826
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05786**

Amount of Each Receipt this Period  
 255.00

**C. RICHARD W. SHAFFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 82751 BOSTON COURT

City INDIO	State CA	Zip Code 92201-5909
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05787**

Amount of Each Receipt this Period  
 35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	291.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2034 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DORIS F. SHAHA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2889 FIDLER AVENUE  
 City LONG BEACH State CA Zip Code 90815-1042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05788**  
 Amount of Each Receipt this Period  
 230.00

**B. MRS. DORIS F. SHAHA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2889 FIDLER AVENUE  
 City LONG BEACH State CA Zip Code 90815-1042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05789**  
 Amount of Each Receipt this Period  
 232.00

**C. MRS. PEI YU SHAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 37 FAMILY LANE  
 City LEVITTOWN State NY Zip Code 11756-3423  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S.P.S. Occupation MAIL CARRIER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05790**  
 Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	522.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2035 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PEI YU SHAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 37 FAMILY LANE

City LEVITTOWN State NY Zip Code 11756-3423

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S.P.S. Occupation MAIL CARRIER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05791**

Amount of Each Receipt this Period  
 60.00

**B. MR. JOHN C. SHANKLIN**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 30  
348 W. HURST STREET

City BUSHNELL State IL Zip Code 61422-0030

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05792**

Amount of Each Receipt this Period  
 106.00

**C. MR. FRANK E. SHANLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 6 FAIR HAVEN ROAD

City RUMSON State NJ Zip Code 07760-1015

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTMENT MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05793**

Amount of Each Receipt this Period  
 450.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 616.00

**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 2036 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BARBARA J. SHAPIRO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2460 PROFESSIONAL COURT  
 SUITE 120  
 City LAS VEGAS State NV Zip Code 89128-0832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REALTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05794**  
 Amount of Each Receipt this Period  
 235.00

**B. MRS. BARBARA J. SHAPIRO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2460 PROFESSIONAL COURT  
 SUITE 120  
 City LAS VEGAS State NV Zip Code 89128-0832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REALTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05795**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. RANDALL SHARER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 839 FOXEN CANYON ROAD  
 City SANTA MARIA State CA Zip Code 93454-9608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05796**  
 Amount of Each Receipt this Period  
 400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	755.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2037 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT W. SHARP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 GITTINGS AVENUE  
 City BALTIMORE State MD Zip Code 21212-2418  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05797**  
 Amount of Each Receipt this Period 1.00

**B. MR. STEPHEN D. SHARP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 626 19TH STREET  
 City HUNTINGTON BEACH State CA Zip Code 92648-3816  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JACOBS Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05798**  
 Amount of Each Receipt this Period 60.00

**C. MR. GEORGE H. SHATTUCK JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7897 S.E. LOBLOLLY BAY DRIVE  
 City HOBE SOUND State FL Zip Code 33455-3832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05799**  
 Amount of Each Receipt this Period 240.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 301.00  
**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 2038 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD SHAW**  
Full Name (Last, First, Middle Initial)

Mailing Address 2449 RHONDA DRIVE

City VESTAL State NY Zip Code 13850-2713

FEC ID number of contributing federal political committee. **C**

Name of Employer OUR COUNTRY HEART INC. Occupation BUSINESS OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 491.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05800**

Amount of Each Receipt this Period  
 246.00

**B. MR. ROBERT G. SHAW**  
Full Name (Last, First, Middle Initial)

Mailing Address 126 LANGDON STREET

City NEWTON State MA Zip Code 02458-1983

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05801**

Amount of Each Receipt this Period  
 50.00

**C. MR. THOMAS SHAW**  
Full Name (Last, First, Middle Initial)

Mailing Address 33450 MARINA BAY CIRCLE

City MILLSBORO State DE Zip Code 19966-7172

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI05802**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 396.00

**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 2039 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. ELIZABETH SHEA**

Mailing Address 2602 S. UNION AVENUE  
APARTMENT C307

City TACOMA State WA Zip Code 98405-1319

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05803**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**B. MS. ELIZABETH SHEA**

Mailing Address 2602 S. UNION AVENUE  
APARTMENT C307

City TACOMA State WA Zip Code 98405-1319

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05804**

Amount of Each Receipt this Period  
20.00

Full Name (Last, First, Middle Initial)  
**C. MS. ELIZABETH SHEA**

Mailing Address 2602 S. UNION AVENUE  
APARTMENT C307

City TACOMA State WA Zip Code 98405-1319

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05805**

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 65.00

**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 2040 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ELIZABETH SHEA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2602 S. UNION AVENUE  
 APARTMENT C307  
 City TACOMA State WA Zip Code 98405-1319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05806**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. PATRICK C. SHEA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 353 COSTA MESA STREET  
 City COSTA MESA State CA Zip Code 92627-2354  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BEACON BAY ENTERPRISES, INC. Occupation BUSINESSMAN  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05807**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. ERIC L. SHEAFFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2009 HAVEMEYER LANE  
 UNIT 2  
 City REDONDO BEACH State CA Zip Code 90278-4959  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05808**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2041 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE H. SHEAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 108 S. CHESTNUT STREET  
City DERRY State PA Zip Code 15627-1979  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 517.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05809**  
Amount of Each Receipt this Period 50.00

**B. MR. GEORGE H. SHEAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 108 S. CHESTNUT STREET  
City DERRY State PA Zip Code 15627-1979  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 517.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05810**  
Amount of Each Receipt this Period 2.00

**C. MR. GEORGE H. SHEAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 108 S. CHESTNUT STREET  
City DERRY State PA Zip Code 15627-1979  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 517.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05811**  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 152.00  
**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 2042 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. KATHLEEN H. SHEEHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9001 SOUTH SACRAMENTO AVENUE  
 City EVERGREEN PARK State IL Zip Code 60805-1333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05812**  
 Amount of Each Receipt this Period  
 201.00

**B. MR. GORDON H. SHEERAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 292 POTTERS RIDGE DRIVE  
 City MOCKSVILLE State NC Zip Code 27028-6288  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AEROS, INC. Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05813**  
 Amount of Each Receipt this Period  
 120.00

**C. MRS. MARTHA A. SHEETZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1817 WESTCOTT DRIVE  
 City LANCASTER State PA Zip Code 17603-2371  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05814**  
 Amount of Each Receipt this Period  
 201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	522.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2043 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SUE S. SHELLADY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 425 CHOPIN COURT  
 City State Zip Code  
 WHEATON IL 60189-2050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05815**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. SCOTT A. SHELTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1720 N. WASHINGTON STREET  
 City State Zip Code  
 WHEATON IL 60187-3263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N.V.R., INC. REGIONAL MANAGER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05816**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. EDNA JOYCE SHENEFIELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4810 NW HIGHWAY 72  
 LOT 88  
 City State Zip Code  
 ARCADIA FL 34266-9330  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05817**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 245.00  
**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 2044 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. EDNA JOYCE SHENEFIELD**

Mailing Address 4810 NW HIGHWAY 72  
LOT 88

City ARCADIA State FL Zip Code 34266-9330

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05818**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**B. MRS. ELLEN S. SHEPARD**

Mailing Address 8450 MIDLAND ROAD

City FREELAND State MI Zip Code 48623-8444

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05819**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**C. MRS. ELLEN S. SHEPARD**

Mailing Address 8450 MIDLAND ROAD

City FREELAND State MI Zip Code 48623-8444

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05820**

Amount of Each Receipt this Period  
31.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	271.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2045 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT B. SHEPARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 301 10TH STREET  
 City WHEATLAND State WY Zip Code 82201-3302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05821**  
 Amount of Each Receipt this Period 100.00

**B. MS. CAROL J. SHEPHERD-FREY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 636 FISHER FIELD ROAD  
 City BLAIRSVILLE State GA Zip Code 30512-7752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05821**  
 Amount of Each Receipt this Period 100.00

**C. MR. ALAN P. SHILEPSKY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19 S. 1ST STREET #B-2507  
 City MINNEAPOLIS State MN Zip Code 55401-1813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ALAN SHILEPSKY CONSULTING INC. Occupation PROGRAMMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI05823**  
 Amount of Each Receipt this Period 50.00

**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: PAGE 2046 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. LEON SHIMER**

Mailing Address 7114 S.W. 90TH STREET

City State Zip Code  
HAMPTON FL 32044-4338

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05824**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. LEON SHIMER**

Mailing Address 7114 S.W. 90TH STREET

City State Zip Code  
HAMPTON FL 32044-4338

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05825**

Amount of Each Receipt this Period  
110.00

Full Name (Last, First, Middle Initial)  
**C. MS. LUCY R. SHINE**

Mailing Address 4846 DEAN LANE S.W.

City State Zip Code  
LILBURN GA 30047-4721

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05826**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 410.00

**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 2047 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ALICE MILDRED SHIPLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 74 WEST GREEN STREET  
 City WESTMINSTER State MD Zip Code 21157-4443  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05827**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. ALICE MILDRED SHIPLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 74 WEST GREEN STREET  
 City WESTMINSTER State MD Zip Code 21157-4443  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05828**  
 Amount of Each Receipt this Period  
 35.00

**C. MS. ALICE MILDRED SHIPLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 74 WEST GREEN STREET  
 City WESTMINSTER State MD Zip Code 21157-4443  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI05829**  
 Amount of Each Receipt this Period  
 52.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2048 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ALICE MILDRED SHIPLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 74 WEST GREEN STREET  
 City WESTMINSTER State MD Zip Code 21157-4443  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05830**  
 Amount of Each Receipt this Period 100.00

**B. MR. LEE SHIPMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4017 E. CRESCENT AVENUE  
 City MESA State AZ Zip Code 85206-1948  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05831**  
 Amount of Each Receipt this Period 100.00

**C. MRS. PATRICIA A. SHIRKEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6884 GRATIOT ROAD  
 City ST. CLAIR State MI Zip Code 48079-2302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SHIRKEY ELECTRIC CO., INC. Occupation OFFICE MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05832**  
 Amount of Each Receipt this Period 100.00

**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 2049 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PAUL T. SHIRLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 18135

City RENO State NV Zip Code 89511-0135

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05833**

Amount of Each Receipt this Period  
 2500.00

**B. MR. TOM SHOCK**  
Full Name (Last, First, Middle Initial)

Mailing Address 22 2ND STREET SW

City CUT BANK State MT Zip Code 59427-3217

FEC ID number of contributing federal political committee. **C**

Name of Employer HVAC DIAGNOSTICS, LLC Occupation HEATING TECHNICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05834**

Amount of Each Receipt this Period  
 120.00

**C. MR. TOM SHOCK**  
Full Name (Last, First, Middle Initial)

Mailing Address 22 2ND STREET SW

City CUT BANK State MT Zip Code 59427-3217

FEC ID number of contributing federal political committee. **C**

Name of Employer HVAC DIAGNOSTICS, LLC Occupation HEATING TECHNICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05835**

Amount of Each Receipt this Period  
 220.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2840.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2050 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DANIEL N. SHOCKEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 17111 LIBRARY BLVD.

City RUTHER GLEN State VA Zip Code 22546-5809

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05836**

Amount of Each Receipt this Period  
 120.00

**B. MR. DANIEL N. SHOCKEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 17111 LIBRARY BLVD.

City RUTHER GLEN State VA Zip Code 22546-5809

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05837**

Amount of Each Receipt this Period  
 100.00

**C. MR. CHARLES SHOCKLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 165 CENTURY COURT

City WYTHEVILLE State VA Zip Code 24382-1087

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI05838**

Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	340.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2051 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PHILIP SHOEMAKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 825 ASCOT LANE  
 City RALEIGH State NC Zip Code 27615-1901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 356.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05839**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. PHILIP SHOEMAKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 825 ASCOT LANE  
 City RALEIGH State NC Zip Code 27615-1901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 356.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05840**  
 Amount of Each Receipt this Period  
 21.00

**C. MRS. LORENA SHOOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 942 N.E. 5TH AVENUE DRIVE  
 City HILLSBORO State OR Zip Code 97124-2339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 282.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05841**  
 Amount of Each Receipt this Period  
 71.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 292.00  
**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 2052 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LORENA SHOOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 942 N.E. 5TH AVENUE DRIVE  
 City HillsBORO State OR Zip Code 97124-2339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 282.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05842**  
 Amount of Each Receipt this Period 55.00

**B. MRS. LORENA SHOOK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 942 N.E. 5TH AVENUE DRIVE  
 City HillsBORO State OR Zip Code 97124-2339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 282.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI05843**  
 Amount of Each Receipt this Period 1.00

**C. MR. JAMES F. SHORT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13131 ROSEWOOD GLEN DRIVE  
 City CYPRESS State TX Zip Code 77429-5104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PATTERSON DENTAL COMPANY Occupation DENTAL SALES REPRESENTATIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05844**  
 Amount of Each Receipt this Period 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 176.00  
**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 2053 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERTSON H. SHORT JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 HOT SPRINGS ROAD #20  
 City SANTA BARBARA State CA Zip Code 93108-2037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05845**  
 Amount of Each Receipt this Period  
 1000.00

**B. MRS. NANCY K. SHRADER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9333 ROLLING CIRCLE  
 City SAN ANTONIO State FL Zip Code 33576-4651  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05846**  
 Amount of Each Receipt this Period  
 240.00

**C. MRS. ROBERT SHRINER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1815 MILTON DRIVE  
 City CHEYENNE State WY Zip Code 82001-1644  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI05847**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1360.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2054 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ROBERT SHRINER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1815 MILTON DRIVE

City CHEYENNE State WY Zip Code 82001-1644

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05848**

Amount of Each Receipt this Period  
225.00

**B. MS. AMY PAO CHING SHU LAI**  
Full Name (Last, First, Middle Initial)

Mailing Address 6793 SEVERN PLACE

City LIBERTY TOWNSHIP State OH Zip Code 45044-9608

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05849**

Amount of Each Receipt this Period  
70.00

**C. MR. BRADLEY W. SHUMAKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2738 IVYWOOD DRIVE

City WARSAW State IN Zip Code 46582-1927

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05850**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 395.00

**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 2055 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRADLEY W. SHUMAKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2738 IVYWOOD DRIVE

City WARSAW State IN Zip Code 46582-1927

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05851**

Amount of Each Receipt this Period  
100.00

**B. MRS. NANCY SHUMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 29 WEDGEWOOD DRIVE

City WINTHROP State ME Zip Code 04364-3200

FEC ID number of contributing federal political committee. **C**

Name of Employer CHARLIES MOTOR MALL Occupation EXECUTIVE VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05852**

Amount of Each Receipt this Period  
750.00

**C. MR. SAMUEL SHUMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 645 NEIL AVENUE

City COLUMBUS State OH Zip Code 43215-1624

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05853**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2056 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. MATT ALLEN SHUPE**

Mailing Address 301 RHODE ISLAND  
APT B4

City State Zip Code  
SAN FRANCISCO CA 94103-5156

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PRAETORIAN PUBLIC RELATIONS REQUESTED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05854**

Amount of Each Receipt this Period  
350.00

Full Name (Last, First, Middle Initial)  
**B. MR. RANDY SICK**

Mailing Address 12835 MAGIC FALLS DRIVE

City State Zip Code  
TOMBALL TX 77377-8178

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED REQUESTED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05855**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**C. MR. RANDY SICK**

Mailing Address 12835 MAGIC FALLS DRIVE

City State Zip Code  
TOMBALL TX 77377-8178

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED REQUESTED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05856**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 520.00

**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 2057 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JULIANE A. SIDOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 911 14TH STREET  
 City NORTH CHICAGO State IL Zip Code 60064-1413  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05857**  
 Amount of Each Receipt this Period  
 140.00

**B. MR. DENNIS SIEKIERSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1439 E. 11 MILE ROAD  
 City MADISON HEIGHTS State MI Zip Code 48071-3807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DENKEN ENGINEERED ELECTRIC, INC. Occupation ELECTRICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05858**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. RICHARD H. SIEVERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 618  
 City MINOOKA State IL Zip Code 60447-0618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05859**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	640.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2058 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. NEAL SIEWERT**

Mailing Address 8430 SOUTHBRIDGE DR

City State Zip Code  
FORT MYERS FL 33967-5587

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI05860**

Amount of Each Receipt this Period  
70.00

Full Name (Last, First, Middle Initial)  
**B. MS. M F SIGMON**

Mailing Address P.O. BOX 67

City State Zip Code  
SHERARD MS 38669-0067

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI05861**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MR. RICHARD L. SIGMON**

Mailing Address 2329 LABURNUM AVENUE

City State Zip Code  
CHARLOTTE NC 28205-6045

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
CHARLOTTE MEDICAL CLINIC PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI05862**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 770.00

**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 2059 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD L. SIGMON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2329 LABURNUM AVENUE  
 City CHARLOTTE State NC Zip Code 28205-6045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CHARLOTTE MEDICAL CLINIC Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05863**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. JOHN R. SILL U.S.N. (RE)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 930 CHIP CREEK COURT  
 City MINDEN State NV Zip Code 89423-7724  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI05864**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JOHN R. SILL U.S.N. (RE)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 930 CHIP CREEK COURT  
 City MINDEN State NV Zip Code 89423-7724  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05865**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2060 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. CHRISTOPHER C. SILLIMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5005 PINYON DRIVE  
 City LITTLETON State CO Zip Code 80123-1552  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNIVERSITY OF COLORADO Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05866**  
 Amount of Each Receipt this Period  
 330.00

**B. MRS. MARY L. SILLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1500 OLD JOPPA ROAD  
 City JOPPA State MD Zip Code 21085-3110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05867**  
 Amount of Each Receipt this Period  
 30.00

**C. MRS. MARY L. SILLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1500 OLD JOPPA ROAD  
 City JOPPA State MD Zip Code 21085-3110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05868**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	385.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2061 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY L. SILLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1500 OLD JOPPA ROAD  
 City JOPPA State MD Zip Code 21085-3110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI05869**  
 Amount of Each Receipt this Period  
 300.00

**B. MRS. MARY L. SILLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1500 OLD JOPPA ROAD  
 City JOPPA State MD Zip Code 21085-3110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05870**  
 Amount of Each Receipt this Period  
 31.00

**C. MR. ALVARO J. SILVA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 SUNSET DRIVE  
 City CORAL GABLES State FL Zip Code 33143-6239  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05871**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	161.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2062 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALVARO J. SILVA**  
Full Name (Last, First, Middle Initial)  
Mailing Address 700 SUNSET DRIVE  
City CORAL GABLES State FL Zip Code 33143-6239  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 31 / 2014  
Transaction ID : 2014M04L11AI05872  
Amount of Each Receipt this Period 101.00

**B. MR. CAYETANO SILVA III**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5622 CAPEVIEW COVE LANE  
City RICHMOND State TX Zip Code 77469-4294  
FEC ID number of contributing federal political committee. **C**  
Name of Employer JAMES CONST. GROUP L. L. C. Occupation VICE PRESIDENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 310.00

Date of Receipt 03 / 06 / 2014  
Transaction ID : 2014M04L11AI05873  
Amount of Each Receipt this Period 35.00

**C. MR. JAMES A. SILVA**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4966 POOLA ST.  
City HONOLULU State HI Zip Code 96821-1458  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 235.00

Date of Receipt 03 / 17 / 2014  
Transaction ID : 2014M04L11AI05874  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 186.00  
**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 2063 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES A. SILVA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4966 POOLA ST.  
 City HONOLULU State HI Zip Code 96821-1458  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05875**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. MARTIN G. SILVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 125 SEMINOLE AVENUE  
 City PALM BEACH State FL Zip Code 33480-3732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MANUFACTURER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05876**  
 Amount of Each Receipt this Period  
 2000.00

**C. MR. STEVEN J. SILVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3325 NORTH 141ST STREET  
 City OMAHA State NE Zip Code 68164-5405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INTERNATIONAL NUTRITION, INC. Occupation BUSINESS EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05877**  
 Amount of Each Receipt this Period  
 2200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2064 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALLAN SILVERMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35 WATERGATE DRIVE  
 SUITE 705  
 City SARASOTA State FL Zip Code 34236-3500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 721.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05878**  
 Amount of Each Receipt this Period  
 361.00

**B. MRS. JAN SILVERMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7383 ORANGEWOOD LANE  
 PENTHOUSE D.  
 City BOCA RATON State FL Zip Code 33433-7471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05879**  
 Amount of Each Receipt this Period  
 120.00

**C. MRS. JAN SILVERMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7383 ORANGEWOOD LANE  
 PENTHOUSE D.  
 City BOCA RATON State FL Zip Code 33433-7471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05880**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 531.00  
**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 2065 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES SIMAZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 467 DALEWOOD DRIVE  
 City ORINDA State CA Zip Code 94563-1205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05881**  
 Amount of Each Receipt this Period  
 250.00

**B. DR. LEV S. SIMKHAYEV**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 36 NORTHWOODS ROAD  
 City OCEAN State NJ Zip Code 07712-2535  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05882**  
 Amount of Each Receipt this Period  
 1500.00

**C. MR. D. RAMSAY SIMMONS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 760  
 City BAINBRIDGE State GA Zip Code 39818-0760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05883**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2066 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. D. RAMSAY SIMMONS JR.**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 760

City BAINBRIDGE State GA Zip Code 39818-0760

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTMENTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05884**

Amount of Each Receipt this Period  
201.00

**B. DR. JOHN F. SIMMONS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 212 S. LIVE OAK STREET

City GENEVA State AL Zip Code 36340-2318

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation MEDICAL DOCTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
03 / 05 / 2014  
**Transaction ID : 2014M04L11AI05885**

Amount of Each Receipt this Period  
500.00

**C. DR. JOHN F. SIMMONS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 212 S. LIVE OAK STREET

City GENEVA State AL Zip Code 36340-2318

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation MEDICAL DOCTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
03 / 19 / 2014  
**Transaction ID : 2014M04L11AI05886**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1201.00

**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 2067 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LAURENCE E. SIMMONS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 TRAVIS STREET, SUITE 6600  
 City HOUSTON State TX Zip Code 77002-2921  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SCF PARTNERS Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 22300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05887**  
 Amount of Each Receipt this Period  
 22300.00

**B. MR. ROBERT SIMMONS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3224 63RD STREET APARTMENT E.  
 City LUBBOCK State TX Zip Code 79413-5745  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05888**  
 Amount of Each Receipt this Period  
 1000.00

**C. MR. ROBERT SIMMONS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3224 63RD STREET APARTMENT E.  
 City LUBBOCK State TX Zip Code 79413-5745  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05889**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	23350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2068 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT SIMMONS**  
Full Name (Last, First, Middle Initial)

Mailing Address 3224 63RD STREET  
APARTMENT E.

City LUBBOCK State TX Zip Code 79413-5745

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05890**

Amount of Each Receipt this Period  
100.00

**B. MRS. VIRGINIA M. SIMMONS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2923 DEL MONTE

City HOUSTON State TX Zip Code 77019-3211

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32300.00

Date of Receipt  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05891**

Amount of Each Receipt this Period  
32300.00

**C. MR. WILLIAM W. SIMMONS**  
Full Name (Last, First, Middle Initial)

Mailing Address 904 WINDING WAY

City SALISBURY State MD Zip Code 21804-9200

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05892**

Amount of Each Receipt this Period  
56.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 32456.00

**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 2069 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. WILLIS M. SIMMONS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19722 LACE RD  
 City CHUGIAK State AK Zip Code 99567-6414  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FAA Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05893**  
 Amount of Each Receipt this Period  
 100.00

**B. DR. WILLIS M. SIMMONS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19722 LACE RD  
 City CHUGIAK State AK Zip Code 99567-6414  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FAA Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05894**  
 Amount of Each Receipt this Period  
 50.00

**C. DR. WILLIS M. SIMMONS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19722 LACE RD  
 City CHUGIAK State AK Zip Code 99567-6414  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FAA Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05895**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2070 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM J. SIMMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 361 S.W. 75TH TERRACE  
 City PLANTATION State FL Zip Code 33317-3208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05896**  
 Amount of Each Receipt this Period  
 150.00

**B. MS. LOIS A. SIMONS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3903 19TH AVENUE N. W.  
 City ROCHESTER State MN Zip Code 55901-0548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05897**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. CLIFFORD ERIC SIMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19203 N. 29TH AVENUE  
 LOT 389  
 City PHOENIX State AZ Zip Code 85027-4955  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05898**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2071 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CLIFFORD ERIC SIMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19203 N. 29TH AVENUE  
 LOT 389  
 City PHOENIX State AZ Zip Code 85027-4955  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05899**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. DAVID SIMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2061 MYRTLEWOOD DRIVE  
 City MONTGOMERY State AL Zip Code 36111-1003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05900**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. GENEVA F. SIMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4862 W. KENTUCKY 9  
 City VANCEBURG State KY Zip Code 41179-8299  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05901**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	420.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2072 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HOWARD M. SIMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4203 N. CHELSEA PLACE  
 City PEORIA State IL Zip Code 61614-7205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05902**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. HOWARD M. SIMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4203 N. CHELSEA PLACE  
 City PEORIA State IL Zip Code 61614-7205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05903**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. JOHN M. SIMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 511 HILLTOP TERRACE  
 City ALEXANDRIA State VA Zip Code 22301-2717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05904**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 380.00  
**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 2073 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. S. FRANK SIMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2170 CASCADING CREEK COURT  
 City CUMMING State GA Zip Code 30041-7696  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INT. GOURMET PRO., INC. Occupation C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05905**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. JOHN OTTO SIMUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15456 ADLONG DRIVE  
 City ROANOKE State TX Zip Code 76262-3309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05906**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. MARVIN R. SINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address H.C. 71 BOX 91  
 City CAPON BRIDGE State WV Zip Code 26711-9501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 331.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05907**  
 Amount of Each Receipt this Period  
 111.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1211.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2074 OF 2949  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BIKRAM JIT SINGH**  
Full Name (Last, First, Middle Initial)

Mailing Address 22 VIA DE LUNA DRIVE  
APARTMENT 1701

City PENSACOLA BEACH State FL Zip Code 32561-2076

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05908**

Amount of Each Receipt this Period  
100.00

**B. MR. PETER W. SINNEMA**  
Full Name (Last, First, Middle Initial)

Mailing Address 16801 BRADGATE AVENUE

City CLEVELAND State OH Zip Code 44111-4251

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
510.00

Date of Receipt  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05909**

Amount of Each Receipt this Period  
140.00

**C. MR. PETER W. SINNEMA**  
Full Name (Last, First, Middle Initial)

Mailing Address 16801 BRADGATE AVENUE

City CLEVELAND State OH Zip Code 44111-4251

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
510.00

Date of Receipt  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05910**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 290.00

**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 2075 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT M. SINSKEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 351 23RD STREET  
 City SANTA MONICA State CA Zip Code 90402-2513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05911**  
 Amount of Each Receipt this Period  
 106.00

**B. MRS. DONNA M. SIPP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 388  
 City HAY SPRINGS State NE Zip Code 69347-0388  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05912**  
 Amount of Each Receipt this Period  
 70.00

**C. BRIAN SIRES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8230 BEAVER HILLS LANE  
 City CEDAR FALLS State IA Zip Code 50613-9367  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COVENANT MEDICAL CENTER Occupation DOCTOR  
 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  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05913**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	476.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2076 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID SIRIGNANO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7902 OLD MARSH LANE  
 City State Zip Code  
 ALEXANDRIA VA 22315-5049  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MORGAN, LEWIS & BOCKIUS, L.L.P. ATTORNEY  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05914**  
 Amount of Each Receipt this Period  
 200.00

**B. MRS. JANE W. SISTRUNK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 419 EAST & WEST STREET  
 City State Zip Code  
 MINDEN LA 71055-2653  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05915**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. STANLEY A. SITKO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 73-4523 MAMALAHOA HIGHWAY  
 City State Zip Code  
 KAILUA KONA HI 96740-9192  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 COUNTY OF HAWAII REAL PROPERTY TAX ADMINISTRATION  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05916**  
 Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 360.00  
**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 2077 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. YANICK SIXTO**  
Full Name (Last, First, Middle Initial)

Mailing Address 2060 BAYLIS AVENUE

City ELMONT State NY Zip Code 11003-2935

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /   
**Transaction ID : 2014M04L11AI05917**

Amount of Each Receipt this Period

**B. MR. JOHN P. SKAGERBERG**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 9326

City MINNEAPOLIS State MN Zip Code 55440-9326

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /   
**Transaction ID : 2014M04L11AI05918**

Amount of Each Receipt this Period

**C. MR. NORMAN C. SKALICKY**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 7338

City SAINT CLOUD State MN Zip Code 56302-7338

FEC ID number of contributing federal political committee.

Name of Employer STEARNS BANK, N.A. Occupation C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 /  /   
**Transaction ID : 2014M04L11AI05919**

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1550.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2078 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. CAROL SKANSE**

Mailing Address **6651 AUTO CLUB ROAD**

City **MINNEAPOLIS** State **MN** Zip Code **55438-2408**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
**03 / 18 / 2014**  
**Transaction ID : 2014M04L11AI05920**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**B. MR. THOMAS SKOCILICH**

Mailing Address **25949 28TH STREET**

City **SAN BERNARDINO** State **CA** Zip Code **92404-3501**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PAYAIL STAIWURER** Occupation **DRAFTSMAN**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt  
**03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI05921**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**C. MR. PAUL K. SKOGLUND**

Mailing Address **8426 N.E. 10TH STREET**

City **MEDINA** State **WA** Zip Code **98039-3917**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FLOW CONTROL INDUSTRIES, INC.** Occupation **ENGINEER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **605.00**

Date of Receipt  
**03 / 07 / 2014**  
**Transaction ID : 2014M04L11AI05922**

Amount of Each Receipt this Period  
**605.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **1205.00**

**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 2079 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOSEPH R. SKOLTE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17016 WELCH SHORTCUT  
 City State Zip Code  
 WELCH MN 55089-6316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 310.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05923**  
 Amount of Each Receipt this Period  
 200.00

**B. MS. LINDA A. SKOOG SLUMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 939 CLEVELAND ROAD  
 City State Zip Code  
 HINSDALE IL 60521-4809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF - EMPLOYED PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05924**  
 Amount of Each Receipt this Period  
 500.00

**C. MRS. ROZELLA W. SLAFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1708 LAWRENCE STREET  
 City State Zip Code  
 BENTONVILLE AR 72712-6835  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 WAL-MART STORE, INC. TAX ACCOUNTING MANAGER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05925**  
 Amount of Each Receipt this Period  
 150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**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 2080 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. SCOTT H. SLATE**

Mailing Address 10020 WINECREST RD.

City State Zip Code  
SAN DIEGO CA 92127-3724

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SHS DEVELOPMENT CORP. REAL ESTATE INVESTMENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05926**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. MR. ARNOLD SLATIN**

Mailing Address 8301 E. SHERIDAN STREET

City State Zip Code  
SCOTTSDALE AZ 85257-2345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05927**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MR. ARNOLD SLATIN**

Mailing Address 8301 E. SHERIDAN STREET

City State Zip Code  
SCOTTSDALE AZ 85257-2345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05928**

Amount of Each Receipt this Period  
51.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1151.00

**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 2081 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID F. SLAUGHTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5601 POSTON WAY  
 APARTMENT 1221  
 City KNOXVILLE State TN Zip Code 37918-7093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05929**  
 Amount of Each Receipt this Period 250.00

**B. MR. CRAIG SLAYTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10315 STONYDALE DRIVE  
 City CUPERTINO State CA Zip Code 95014-1073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RAMBUS INC. Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05930**  
 Amount of Each Receipt this Period 150.00

**C. MR. RODNEY E. SLIFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 230 BRIDGE STREET  
 City VAIL State CO Zip Code 81657-3619  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05931**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00  
**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 2082 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. ROBERT L. SLIGH</b>		Date of Receipt 03 / 21 / 2014 <b>Transaction ID : 2014M04L11AI05932</b>
Mailing Address 145 COLUMBIA AVENUE APARTMENT 720		Amount of Each Receipt this Period 202.00
City HOLLAND	State MI	
Zip Code 49423-2989		Aggregate Year-to-Date ▼ 202.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. MR. LARRY SLOAN</b>		Date of Receipt 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI05933</b>
Mailing Address P.O. BOX 390		Amount of Each Receipt this Period 201.00
City WALNUT RIDGE	State AR	
Zip Code 72476-0390		Aggregate Year-to-Date ▼ 201.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. MR. TIMOTHY J. SLOAN</b>		Date of Receipt 03 / 14 / 2014 <b>Transaction ID : 2014M04L11AI05934</b>
Mailing Address 1320 WOODSTOCK ROAD		Amount of Each Receipt this Period 32400.00
City SAN MARINO	State CA	
Zip Code 91108-1061		Aggregate Year-to-Date ▼ 32400.00
FEC ID number of contributing federal political committee. C		
Name of Employer WELLS FARGO & COMPANY	Occupation C.F.O.	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32803.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2083 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD P. SMALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1585 E. 22ND STREET  
 City TULSA State OK Zip Code 74114-1305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05935**  
 Amount of Each Receipt this Period  
 2500.00

**B. MR. HENRY SMEK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1455 OCEAN DRIVE APARTMENT 805  
 City MIAMI BEACH State FL Zip Code 33139-4139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05936**  
 Amount of Each Receipt this Period  
 251.00

**C. MR. ROBERT SMICKLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 GENTLEMENS RIDGE  
 City SIGNAL MOUNTAIN State TN Zip Code 37377-3250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer METAL TEK INT'L. INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05937**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2871.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2084 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. ANN SMITH**

Mailing Address **28876 BELCHESTER ROAD**

City **KENNEDYVILLE** State **MD** Zip Code **21645-3318**

FEC ID number of contributing federal political committee. **C**

Name of Employer **REQUESTED** Occupation **REQUESTED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 12 / 2014**

**Transaction ID : 2014M04L11AI05938**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**B. MRS. BARBARA SMITH**

Mailing Address **1885 GERMAN CHAPEL ROAD**

City **PRNC FREDERCK** State **MD** Zip Code **20678-3608**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2014**

**Transaction ID : 2014M04L11AI05939**

Amount of Each Receipt this Period  
**150.00**

Full Name (Last, First, Middle Initial)  
**C. MR. BENSON SMITH**

Mailing Address **1095 MAPLE HILL LANE**

City **MALVERN** State **PA** Zip Code **19355-2340**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TELEFLEX, INC.** Occupation **C.E.O.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2014**

**Transaction ID : 2014M04L11AI05940**

Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1400.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2085 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. BETTY M. SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 1101 SMITHLAND BEND

City ANDERSON State SC Zip Code 29621-5091

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05941**

Amount of Each Receipt this Period  
 151.00

**B. MS. BEVERLY M. SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 1223 MASON STREET

City DEKALB State IL Zip Code 60115-5906

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05942**

Amount of Each Receipt this Period  
 115.00

**C. MR. BLAINE H. SMITH JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 4250 N. 5TH STREET

City DUNCAN State OK Zip Code 73533-5536

FEC ID number of contributing federal political committee. **C**

Name of Employer ASCOG Occupation ADMINISTRATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05943**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	516.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2086 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRUCE D. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 256  
 City CANADIAN State OK Zip Code 74425-0256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05944**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. BRUCE D. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 256  
 City CANADIAN State OK Zip Code 74425-0256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05945**  
 Amount of Each Receipt this Period  
 110.00

**C. MR. CARROL G. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4700 OAKHURST BLVD.  
 APARTMENT 311  
 City HARRISBURG State PA Zip Code 17110-4005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI05946**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	280.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2087 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CLARENCE R. SMITH JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 3107  
 City YOUNGSTOWN State OH Zip Code 44513-3107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05947**  
 Amount of Each Receipt this Period  
 330.00

**B. MRS. D. KAY SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 627 PALMER LANE  
 City CHEWELAH State WA Zip Code 99109-9425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05948**  
 Amount of Each Receipt this Period  
 125.00

**C. MR. DAVID G. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6539 MOORINGS POINT CIRCLE  
 UNIT 201  
 City BRADENTON State FL Zip Code 34202-1224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI05949**  
 Amount of Each Receipt this Period  
 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 565.00  
**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 2088 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID G. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6539 MOORINGS POINT CIRCLE  
 UNIT 201  
 City BRADENTON State FL Zip Code 34202-1224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05950**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. DAVID K. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 611 W. FOREST DRIVE  
 City HOUSTON State TX Zip Code 77079-6915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI05951**  
 Amount of Each Receipt this Period  
 145.00

**C. MR. DAVID S. J. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 MONTGOMERY LANE  
 City RADNOR State PA Zip Code 19087-4424  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JANNEY MONTGOMERY SCOTT L.L.C.. Occupation STOCK BROKER  
 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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05952**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 495.00  
**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 2089 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DEBBIE O. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1450 W. BRIDGE STREET  
 City PHOENIX State AZ Zip Code 85045-0769  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation CLAIMS MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05953**  
 Amount of Each Receipt this Period  
 120.00

**B. MRS. DEBBIE O. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1450 W. BRIDGE STREET  
 City PHOENIX State AZ Zip Code 85045-0769  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STATE FARM Occupation CLAIMS MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05954**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. DRANE SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1305 DOUGLAS DRIVE  
 City BAINBRIDGE State GA Zip Code 39819-5123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05955**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	171.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2090 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DRANE SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1305 DOUGLAS DRIVE  
 City BAINBRIDGE State GA Zip Code 39819-5123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05956**  
 Amount of Each Receipt this Period  
 51.00

**B. MR. EDWARD B. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 725 LAUREL LANE  
 City LAKELAND State FL Zip Code 33813-1653  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PRO-PET, L.L.C. Occupation ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05957**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. FORREST SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21676 COUNTY ROAD E34  
 City ANAMOSA State IA Zip Code 52205-7847  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05958**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2091 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FORREST SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 21676 COUNTY ROAD E34

City ANAMOSA State IA Zip Code 52205-7847

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05959**

Amount of Each Receipt this Period  
 1.00

**B. MR. FRANK L. SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 23199 NORTH SHORE DRIVE

City EMILY State MN Zip Code 56447-4030

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05960**

Amount of Each Receipt this Period  
 120.00

**C. DR. GEORGE L. SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 7017 OAKMONT DRIVE

City SANTA ROSA State CA Zip Code 95409-6301

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF - EMPLOYED Occupation MUSICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI05961**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	371.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2092 OF 2949		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GORDON SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3105 ASHWORTH ROAD  
 City WEST DES MOINES State IA Zip Code 50265-3251  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05962**  
 Amount of Each Receipt this Period  
 220.00

**B. MR. HAROLD B. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 120 VIA DEL LAGO  
 City PALM BEACH State FL Zip Code 33480-4917  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05963**  
 Amount of Each Receipt this Period  
 15000.00

**C. MRS. HELEN SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 221051  
 City SAINT LOUIS State MO Zip Code 63122-8051  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05964**  
 Amount of Each Receipt this Period  
 90.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15310.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2093 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JUDITH L. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3109 HIDDEN TREASURE DRIVE  
 City LAS VEGAS State NV Zip Code 89134-8587  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 296.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05965**  
 Amount of Each Receipt this Period  
 50.00

**B. MS. JUDITH L. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3109 HIDDEN TREASURE DRIVE  
 City LAS VEGAS State NV Zip Code 89134-8587  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 296.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI05966**  
 Amount of Each Receipt this Period  
 31.00

**C. MS. JUDITH L. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3109 HIDDEN TREASURE DRIVE  
 City LAS VEGAS State NV Zip Code 89134-8587  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 296.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05967**  
 Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 111.00  
**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 2094 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KEITH SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 45 ROYAL OAKS LANE  
 City LYNDHURST State VA Zip Code 22952-2823  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05968**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. KEITH SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 45 ROYAL OAKS LANE  
 City LYNDHURST State VA Zip Code 22952-2823  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05969**  
 Amount of Each Receipt this Period  
 95.00

**C. MR. KELLY W. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 255 S. ORANGE AVENUE SUITE 800  
 City ORLANDO State FL Zip Code 32801-3452  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05970**  
 Amount of Each Receipt this Period  
 185.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2095 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. LADY F. SMITH</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 13 / 2014 <b>Transaction ID : 2014M04L11AI05971</b>
Mailing Address 3890 NOBEL DRIVE SUITE 1704		Amount of Each Receipt this Period 300.00
City SAN DIEGO State CA Zip Code 92122-5784	Aggregate Year-to-Date ▼ 435.00	
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MRS. MAIDA PEARSON SMITH</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2014 <b>Transaction ID : 2014M04L11AI05972</b>
Mailing Address 7405 CRESTRIDGE ROAD		Amount of Each Receipt this Period 1000.00
City MEMPHIS State TN Zip Code 38119-9001	Aggregate Year-to-Date ▼ 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. MARK S. SMITH</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 04 / 2014 <b>Transaction ID : 2014M04L11AI05973</b>
Mailing Address 1475 260TH STREET		Amount of Each Receipt this Period 250.00
City LYTTON State IA Zip Code 50561-7519	Aggregate Year-to-Date ▼ 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED Occupation REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<b>TOTAL</b> This Period (last page this line number only).....	1550.00

**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 2096 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARSHA SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 148 WARREN HILL ROAD  
 City CORNWALL BRIDGE State CT Zip Code 06754-1303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **350.00**

Date of Receipt: **03 / 18 / 2014**  
**Transaction ID : 2014M04L11AI05974**  
 Amount of Each Receipt this Period: **100.00**

**B. MR. MERRILL SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1810 MOUNTAIN SHADOW DRIVE  
 City CARLSBAD State NM Zip Code 88220-4149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **310.00**

Date of Receipt: **03 / 04 / 2014**  
**Transaction ID : 2014M04L11AI05975**  
 Amount of Each Receipt this Period: **40.00**

**C. MR. MERRILL SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1810 MOUNTAIN SHADOW DRIVE  
 City CARLSBAD State NM Zip Code 88220-4149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **310.00**

Date of Receipt: **03 / 27 / 2014**  
**Transaction ID : 2014M04L11AI05976**  
 Amount of Each Receipt this Period: **220.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>360.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2097 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MERRILL SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 1810 MOUNTAIN SHADOW DRIVE

City CARLSBAD	State NM	Zip Code 88220-4149
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI05977**

Amount of Each Receipt this Period  
 50.00

**B. MR. MICHAEL A. SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 151 VALPRO DRIVE

City WINCHESTER	State VA	Zip Code 22603-3607
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer VALLEY PROTEINS	Occupation EXECUTIVE
-------------------------------------	-------------------------

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  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05978**

Amount of Each Receipt this Period  
 750.00

**C. MS. MIRIAM A. SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 RIVERSIDE DRIVE

City BURLEY	State ID	Zip Code 83318-5414
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation FARMER
-----------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05979**

Amount of Each Receipt this Period  
 201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1001.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2098 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT L. SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 11 NORMAN ROAD

City BINGHAMTON State NY Zip Code 13901-1301

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05980**

Amount of Each Receipt this Period  
 200.00

**B. MRS. ROSE M. SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 8270 RAUPP AVENUE

City YOUNGSTOWN State OH Zip Code 44512-6301

FEC ID number of contributing federal political committee. **C**

Name of Employer DIAMOND STEEL CONSTRUCTION Occupation VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI05981**

Amount of Each Receipt this Period  
 500.00

**C. MRS. SHERRY C. SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 6292 FORESTER DRIVE

City HUNTINGTON BEACH State CA Zip Code 92648-6611

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI05982**

Amount of Each Receipt this Period  
 180.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2099 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS D. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8453 COUNTY ROAD 13  
 City WAUSEON State OH Zip Code 43567-9634  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI05983**  
 Amount of Each Receipt this Period  
 220.00

**B. MR. THOMAS J. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4951 COUNTY ROAD 6  
 City BISHOP State TX Zip Code 78343-5074  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI05984**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. THOMAS J. SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N6802 COUNTY ROAD M.  
 City BRANDON State WI Zip Code 53919-9535  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI05985**  
 Amount of Each Receipt this Period  
 26.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 446.00  
**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 2100 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 728 NORRISTOWN ROAD  
 APARTMENT G104  
 City AMBLER State PA Zip Code 19002-2135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 776.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI05986**  
 Amount of Each Receipt this Period  
 175.00

**B. MR. WILLIAM SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 728 NORRISTOWN ROAD  
 APARTMENT G104  
 City AMBLER State PA Zip Code 19002-2135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 776.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI05987**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. WILLIAM SMITH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 728 NORRISTOWN ROAD  
 APARTMENT G104  
 City AMBLER State PA Zip Code 19002-2135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 776.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI05988**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 375.00  
**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 2101 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. WILLIAM SMITH</b>		Date of Receipt
Mailing Address 728 NORRISTOWN ROAD APARTMENT G104		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2014
City AMBLER	State PA	Zip Code 19002-2135
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 2014M04L11AI05989</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 776.00	

Full Name (Last, First, Middle Initial) <b>B. MR. WILLIAM SMITH</b>		Date of Receipt
Mailing Address 728 NORRISTOWN ROAD APARTMENT G104		M M M / D D D / Y Y Y Y Y Y 03 / 21 / 2014
City AMBLER	State PA	Zip Code 19002-2135
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 2014M04L11AI05990</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		101.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 776.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. YVONNE SMITH</b>		Date of Receipt
Mailing Address 198 REGAL ROW		M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2014
City HOUMA	State LA	Zip Code 70360-5934
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 2014M04L11AI05991</b>
Name of Employer SELF-EMPLOYED		Amount of Each Receipt this Period
Occupation OWNER-PRESIDENT		601.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 651.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	802.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2102 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. PAULA G. SMITH-KELLEHER</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI05992</b>
Mailing Address 22090 RAMONA AVENUE		Amount of Each Receipt this Period 120.00
City APPLE VALLEY	State CA	Zip Code 92307-4259
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. PAULA G. SMITH-KELLEHER</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI05993</b>
Mailing Address 22090 RAMONA AVENUE		Amount of Each Receipt this Period 35.00
City APPLE VALLEY	State CA	Zip Code 92307-4259
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. PAULA G. SMITH-KELLEHER</b>		Date of Receipt MM / DD / YYYY 03 / 12 / 2014 <b>Transaction ID : 2014M04L11AI05994</b>
Mailing Address 22090 RAMONA AVENUE		Amount of Each Receipt this Period 14.00
City APPLE VALLEY	State CA	Zip Code 92307-4259
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	169.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2103 OF 2949
	<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	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PAULA G. SMITH-KELLEHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22090 RAMONA AVENUE  
 City APPLE VALLEY State CA Zip Code 92307-4259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 249.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI05995**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. CHARLES O. SMITHERS III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2198 PRESTWICK DRIVE  
 City GERMANTOWN State TN Zip Code 38139-5428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COASTAL ENVIROMENTAL GROUP Occupation PROGRAM MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI05996**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. FRANK A. SMOLA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4N697 CHEFFIELD  
 City COMPTON HILLS State IL Zip Code 60175-7844  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KERLIN COPORATION Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05997**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 551.00  
**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 2104 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. WENDY MILLER SMOLEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2142 EDENTON ROAD  
 City CHARLOTTE State NC Zip Code 28211-3852  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI05998**  
 Amount of Each Receipt this Period  
 50.00

**B. DR. CARL A. SMOOT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1633 OLD HIGHWAY 69 E.  
 City FLORENCE State WI Zip Code 54121-9108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI05999**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. JEAN H. SNIFFIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 703 CORNELL STREET  
 City FREDERICKSBURG State VA Zip Code 22401-3743  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06000**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2105 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. BILL C. SNODGRASS</b>		Date of Receipt 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI06001</b>
Mailing Address 301 N. 251ST STREET		Amount of Each Receipt this Period 250.00
City WATERLOO	State NE	Zip Code 68069-4674
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. GEORGIA L.J. SNOKE</b>		Date of Receipt 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI06002</b>
Mailing Address 4502 E. 85TH STREET		Amount of Each Receipt this Period 100.00
City TULSA	State OK	Zip Code 74137-1918
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer SELF-EMPLOYED	Occupation WRITER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. BONNIE SNYDER</b>		Date of Receipt 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI06003</b>
Mailing Address 544 MOUNT OLIVE ROAD		Amount of Each Receipt this Period 100.00
City FREDERICKSBRG	State VA	Zip Code 22406-4311
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer AUGUSTINE HOMES	Occupation LAND DEVELOPMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2106 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRUCE EDWARD SNYDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8729 ALHAMBRA  
 City State Zip Code  
 PRAIRIE VILLAGE KS 66207-2358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 EY C.P.A.  
 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  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06004**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. JAMES E. SNYDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 109 SUNSET TRAIL  
 City State Zip Code  
 SNYDER OK 73566-5002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 335.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06005**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. JIMMY D. SNYDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2205 BELLA ROSA LANE  
 City State Zip Code  
 AMARILLO TX 79124-1033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED CONTRACT SALES  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06006**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**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 2107 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. LEE E. SNYDER**

Mailing Address 1243 E. SOCIAL ROW ROAD

City State Zip Code  
CENTERVILLE OH 45458-4717

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06007**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. LEE E. SNYDER**

Mailing Address 1243 E. SOCIAL ROW ROAD

City State Zip Code  
CENTERVILLE OH 45458-4717

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06008**

Amount of Each Receipt this Period  
101.00

Full Name (Last, First, Middle Initial)  
**C. MR. LOUIS P. SNYDER**

Mailing Address 1248 TANAGER TRAIL

City State Zip Code  
VIRGINIA BEACH VA 23451-4955

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
U.S. SALES CORPORATION MANUFACTURER'S REPRESENTATIVE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
502.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06009**

Amount of Each Receipt this Period  
1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 202.00

**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 2108 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. LOUIS P. SNYDER**

Mailing Address 1248 TANAGER TRAIL

City State Zip Code  
VIRGINIA BEACH VA 23451-4955

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
U.S. SALES CORPORATION MANUFACTURER'S REPRESENTATIVE

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
502.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06010**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. LOUIS P. SNYDER**

Mailing Address 1248 TANAGER TRAIL

City State Zip Code  
VIRGINIA BEACH VA 23451-4955

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
U.S. SALES CORPORATION MANUFACTURER'S REPRESENTATIVE

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
502.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06011**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**C. MRS. MARY ANN SNYDER**

Mailing Address 255 WHITAKER ROAD

City State Zip Code  
PINEY FLATS TN 37686-4554

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SNYDER SIGNS, INC. CO-OWNER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06012**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 351.00

**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 2109 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JOHN S. SOFKA**

Mailing Address 12350 MARLOW AVENUE

City TUSTIN State CA Zip Code 92782-1132

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 11 / 2014**

**Transaction ID : 2014M04L11AI06013**

Amount of Each Receipt this Period  
**110.00**

Full Name (Last, First, Middle Initial)  
**B. MR. RAYMOND W. SOLCHER**

Mailing Address 1413 WHISPERING PINES DRIVE  
APARTMENT 1

City HOUSTON State TX Zip Code 77055-5132

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **252.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 26 / 2014**

**Transaction ID : 2014M04L11AI06014**

Amount of Each Receipt this Period  
**252.00**

Full Name (Last, First, Middle Initial)  
**C. DR. ILONA R. SOLDES**

Mailing Address 10 GRISTMILL LANE

City GREAT NECK State NY Zip Code 11023-1813

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **730.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 05 / 2014**

**Transaction ID : 2014M04L11AI06015**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **612.00**

**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 2110 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM A. SOLEMENE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4400 WILLIAMSBURG ROAD  
 City DALLAS State TX Zip Code 75220-2059  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SOLEMENE AND ASSOCIATES Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06016**  
 Amount of Each Receipt this Period  
 15000.00

**B. MR. TERRY R. SOLOMON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18348 WEST AVENUE D.  
 City LANCASTER State CA Zip Code 93536-9270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06017**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. PAUL C. SOLTOW JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 509 KAY ANN COURT  
 City EL SOBRANTE State CA Zip Code 94803-3406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06018**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2111 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN W. SOMERVILLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9251 SILVER LAKE DRIVE  
 City LEESBURG State FL Zip Code 34788-3415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RESTOR TELECOM, INC. Occupation CTO  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06019**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. BENJAMIN L. SOMMER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1103 E. HOFFORD COURT  
 City PEORIA State IL Zip Code 61614-2246  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06020**  
 Amount of Each Receipt this Period  
 500.00

**C. MS. MARGO A. A. SOMMERFELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4454 CASITAS ST.  
 City SAN DIEGO State CA Zip Code 92107-4218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06021**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**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 2112 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. MARGO A. A. SOMMERFELD</b>		Date of Receipt
Mailing Address 4454 CASITAS ST.		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAN DIEGO	CA	92107-4218
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI06022</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	HOMEMAKER	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="235.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MS. MARGO A. A. SOMMERFELD</b>		Date of Receipt
Mailing Address 4454 CASITAS ST.		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAN DIEGO	CA	92107-4218
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI06023</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	HOMEMAKER	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="235.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MS. MARGO A. A. SOMMERFELD</b>		Date of Receipt
Mailing Address 4454 CASITAS ST.		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAN DIEGO	CA	92107-4218
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI06024</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	HOMEMAKER	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="235.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="100.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 2113 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES A. SONNTAG**  
Full Name (Last, First, Middle Initial)

Mailing Address 123 PEACOCK DRIVE

City SAN RAFAEL State CA Zip Code 94901-1552

FEC ID number of contributing federal political committee. **C**

Name of Employer ROOD, INC. Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 402.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06025**

Amount of Each Receipt this Period  
 100.00

**B. MR. JAMES A. SONNTAG**  
Full Name (Last, First, Middle Initial)

Mailing Address 123 PEACOCK DRIVE

City SAN RAFAEL State CA Zip Code 94901-1552

FEC ID number of contributing federal political committee. **C**

Name of Employer ROOD, INC. Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 402.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06026**

Amount of Each Receipt this Period  
 102.00

**C. MR. ROBERT WILLIAM SOPHER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3010 WINDWILL RANCH ROAD

City WESTON State FL Zip Code 33331-3041

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06027**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	452.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2114 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. MARIAN CRIDER SORENSEN</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 27 / 2014 <b>Transaction ID : 2014M04L11AI06028</b>
Mailing Address 201 S. BROAD STREET APARTMENT 28			Amount of Each Receipt this Period 120.00
City JERSEY SHORE	State PA	Zip Code 17740-1862	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 222.00
Name of Employer REQUESTED		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 222.00	

Full Name (Last, First, Middle Initial) <b>B. MS. MARIAN CRIDER SORENSEN</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014 <b>Transaction ID : 2014M04L11AI06029</b>
Mailing Address 201 S. BROAD STREET APARTMENT 28			Amount of Each Receipt this Period 102.00
City JERSEY SHORE	State PA	Zip Code 17740-1862	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 222.00
Name of Employer REQUESTED		Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 222.00	

Full Name (Last, First, Middle Initial) <b>C. MR. PETER MORSE SORENSEN</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 04 / 2014 <b>Transaction ID : 2014M04L11AI06030</b>
Mailing Address 1260 CEDAR LANE			Amount of Each Receipt this Period 330.00
City INDIALANTIC	State FL	Zip Code 32903-4602	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 330.00
Name of Employer DANE CONTRACTING, INC.		Occupation CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 330.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	552.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2115 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. TODD SORENSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 220453 E. 42ND STREET  
 City SCOTTSBLUFF State NE Zip Code 69361-5727  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REGIONAL WEST MEDICAL CENTER Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06031**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. BRIAN SOUKUP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1013 HARBOR WALK COURT  
 City FORT COLLINS State CO Zip Code 80525-4854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06032**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. ALBERT SOUSSAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18671 COLLINS AVENUE APARTMENT 1201  
 City SUNNY ISLES BEACH State FL Zip Code 33160-7214  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PHIDAL PUBLISHING INC. Occupation PUBLISHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06033**  
 Amount of Each Receipt this Period  
 750.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2116 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MIKEAL STEWART SOUTHWORTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1816 S. 290TH STREET  
 City State Zip Code  
 FEDERAL WAY WA 98003-3817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 U.S. ARMY LEAD MEDICAL TECHNICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06034**  
 Amount of Each Receipt this Period  
 120.00

**B. LAINE SOUZA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 156  
 City State Zip Code  
 WYNCOTE PA 19095-0156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06035**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. RICHARD SOVEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8452 GOLFSIDE DR  
 City State Zip Code  
 COMMERCE TOWNSHIP MI 48382-2215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MI COMMUNITY INSURANCE AGENCY INSURANCE AGENT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06036**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 870.00  
**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 2117 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ELAINE M. SOVIERO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 34 LEROY PLACE  
 City State Zip Code  
 RED BANK NJ 07701-1712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06037**  
 Amount of Each Receipt this Period  
 36.00

**B. MRS. LINDA SPALDING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15990 N. WINAN ROAD  
 City State Zip Code  
 PLATTE CITY MO 64079-9142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06038**  
 Amount of Each Receipt this Period  
 150.00

**C. MRS. LINDA SPALDING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15990 N. WINAN ROAD  
 City State Zip Code  
 PLATTE CITY MO 64079-9142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NONE RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06039**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 211.00  
**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 2118 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LINDA SPALDING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15990 N. WINAN ROAD  
 City PLATTE CITY State MO Zip Code 64079-9142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06040**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. FRANK SPANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6345 BELL CREEK COURT  
 City GRAND BAY State AL Zip Code 36541-3411  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SOUTHERN TRUCK & EQUIPMENT Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06041**  
 Amount of Each Receipt this Period  
 221.00

**C. MRS. FRANCA G. SPARACIO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25 OXBOW ROAD  
 City LEXINGTON State MA Zip Code 02421-6613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06042**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 391.00  
**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 2119 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. BRANDON B. SPARKMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 285 LAKE VIEW DRIVE  
 City MUSCLE SHOALS State AL Zip Code 35661-4027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06043**  
 Amount of Each Receipt this Period  
 211.00

**B. MR. WALLACE SPARKMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 306 W. WALL STREET SUITE 1110  
 City MIDLAND State TX Zip Code 79701-5170  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06044**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. CHARLES SPARKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 706 W. NORTH STREET  
 City HINSDALE State IL Zip Code 60521-3044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CHARLES SPARKS AND COMPANY Occupation ARCHITECT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06045**  
 Amount of Each Receipt this Period  
 225.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	536.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2120 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PATRICK C. SPARKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 390 WHITE OAK DRIVE  
 City MANY State LA Zip Code 71449-5734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PROFESSIONAL DIRECTIONAL, L.T.D. Occupation SMALL BUSINESS OWNER  
 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  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06046**  
 Amount of Each Receipt this Period  
 300.00

**B. MRS. JEANNE M. SPAULDING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 541 E. CRESCENT DRIVE  
 City PALO ALTO State CA Zip Code 94301-3108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06047**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. JEANNE M. SPAULDING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 541 E. CRESCENT DRIVE  
 City PALO ALTO State CA Zip Code 94301-3108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06048**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 2121 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. LEE SPEARY**

Mailing Address 35 SILKBAY PLACE

City State Zip Code  
THE WOODLANDS TX 77382-1604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

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  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06049**

Amount of Each Receipt this Period  
750.00

Full Name (Last, First, Middle Initial)  
**B. MS. ANNA SPENCER**

Mailing Address 3700 MASSACHUSETTS AVE. NW #213

City State Zip Code  
WASHINGTON DC 20016-5804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SIDLEY AUSTIN L.L.P. ATTORNEY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06050**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**C. MRS. GLORIA YVONNE SPENCER**

Mailing Address 59 HIDDEN RIDGE DRIVE

City State Zip Code  
BLOOMFIELD HILLS MI 48304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06051**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3350.00

**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 2122 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. GLORIA YVONNE SPENCER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 59 HIDDEN RIDGE DRIVE  
 City BLOOMFIELD HILLS State MI Zip Code 48304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **310.00**

Date of Receipt: **03 / 14 / 2014**  
**Transaction ID : 2014M04L11AI06052**  
 Amount of Each Receipt this Period: **100.00**

**B. MR. ROGER D. SPENCER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 2551  
 City HAYDEN State ID Zip Code 83835-2551  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt: **03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI06053**  
 Amount of Each Receipt this Period: **130.00**

**C. MS. MARY MCCANN SPICER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 611  
 City LEWES State DE Zip Code 19958-0611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **222.00**

Date of Receipt: **03 / 13 / 2014**  
**Transaction ID : 2014M04L11AI06054**  
 Amount of Each Receipt this Period: **101.00**

**SUBTOTAL** of Receipts This Page (optional)..... **331.00**  
**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 2123 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARY MCCANN SPICER**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 611

City LEWES	State DE	Zip Code 19958-0611
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
222.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2014

**Transaction ID : 2014M04L11AI06055**

Amount of Each Receipt this Period  
1.00

**B. MRS. AGNES SPIDAL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 16630 S.E. HAMPSHIRE LANE

City PORTLAND	State OR	Zip Code 97267-5134
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2014

**Transaction ID : 2014M04L11AI06056**

Amount of Each Receipt this Period  
120.00

**C. MRS. AGNES SPIDAL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 16630 S.E. HAMPSHIRE LANE

City PORTLAND	State OR	Zip Code 97267-5134
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2014

**Transaction ID : 2014M04L11AI06057**

Amount of Each Receipt this Period  
31.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	152.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2124 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN S. SPIECKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3218 PRIMROSE LANE  
 City WALNUT CREEK State CA Zip Code 94598-1719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06058**  
 Amount of Each Receipt this Period  
 100.00

**B. RODGER SPILLARS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8803 S 101ST EAST AVE  
 City TULSA State OK Zip Code 74133-5726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06059**  
 Amount of Each Receipt this Period  
 750.00

**C. MR. FRANCIS V. SPILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2461 BILTMORE DRIVE  
 City ALAMO State CA Zip Code 94507-2305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06060**  
 Amount of Each Receipt this Period  
 76.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	926.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2125 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. A. W. SPILLMAN**

Mailing Address 1326 GREY OAK DRIVE

City SAN ANTONIO State TX Zip Code 78213-1601

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06061**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. MR. KENNETH F. SPITLER**

Mailing Address 9502 BAYOU BROOK STREET

City HOUSTON State TX Zip Code 77063-1058

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06062**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. MR. DALE E. SPOERRY**

Mailing Address 108 GREEN CHASE EAST

City ANDERSON State SC Zip Code 29621-4279

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06063**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2120.00

**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 2126 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARCIA A. SPOLTMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1183 WESTWOOD DRIVE  
 City SIDNEY State OH Zip Code 45365-8992  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06064**  
 Amount of Each Receipt this Period  
 120.00

**B. MS. MARCIA A. SPOLTMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1183 WESTWOOD DRIVE  
 City SIDNEY State OH Zip Code 45365-8992  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06065**  
 Amount of Each Receipt this Period  
 150.00

**C. MR. WILLIAM L. SPOOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1401 S OAK KNOLL AVE  
 City PASADENA State CA Zip Code 91106-4508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BANK OF AMERICA Occupation INVESTMENT BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06066**  
 Amount of Each Receipt this Period  
 2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2770.00  
**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 2127 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. AUDREY SPRATLING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 27  
 City DEETH State NV Zip Code 89823-0027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OWNER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06067**  
 Amount of Each Receipt this Period  
**500.00**

**B. MR. HANS JOACHIM SPRINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 121 N. POST OAK LANE APARTMENT 1706  
 City HOUSTON State TX Zip Code 77024-7713  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation SHIP AGENT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06068**  
 Amount of Each Receipt this Period  
**250.00**

**C. MS. IRENE SPRINKLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3212 LINDALE AVENUE  
 City DAYTON State OH Zip Code 45414-5402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06069**  
 Amount of Each Receipt this Period  
**200.00**

**SUBTOTAL** of Receipts This Page (optional)..... **950.00**  
**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 2128 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT L. SPROAT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 36  
 City JAMISON State PA Zip Code 18929-0036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06070**  
 Amount of Each Receipt this Period  
 155.00

**B. MR. CHARLES H. SPURGEON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 220 RAMONA AVENUE  
 City EL CERRITO State CA Zip Code 94530-4145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06071**  
 Amount of Each Receipt this Period  
 400.00

**C. DR. CANDE L. SRIDHAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18803 FAIRFIELD ROAD  
 City NORTHRIDGE State CA Zip Code 91326-3921  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06072**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	605.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2129 OF 2949		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. RON ST. CROIX</b>		Date of Receipt
Mailing Address P.O. BOX 132		M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014
City	State	Zip Code
KENMARE	ND	58746-0132
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI06073</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		220.00
Name of Employer	Occupation	
KENMARE DRUG	PHARMACIST	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	440.00	

Full Name (Last, First, Middle Initial) <b>B. MR. RALPH F. ST. JOHN</b>		Date of Receipt
Mailing Address 12736 NORTHERN BLVD.		M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014
City	State	Zip Code
FLUSHING	NY	11368-1520
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI06074</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		200.00
Name of Employer	Occupation	
SELF-EMPLOYED	GENERAL CONTRACTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	400.00	

Full Name (Last, First, Middle Initial) <b>C. MR. BRADLEY R. STAATSMA</b>		Date of Receipt
Mailing Address 3031 ELVIDO DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 21 / 2014
City	State	Zip Code
LOS ANGELES	CA	90049-1107
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI06075</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		205.00
Name of Employer	Occupation	
VOLUNTEER	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	205.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	625.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2130 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GERALD P. STADLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 11965 E. LARKSPUR DRIVE

City State Zip Code  
SCOTTSDALE AZ 85259-2722

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06076**

Amount of Each Receipt this Period  
1000.00

**B. MS. JOAN P. STADLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1755 N. STATE ROUTE 560

City State Zip Code  
URBANA OH 43078-9666

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

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  
03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06077**

Amount of Each Receipt this Period  
300.00

**C. MR. ROGER STAFFORD**  
Full Name (Last, First, Middle Initial)

Mailing Address 110 MARIAN LANE

City State Zip Code  
TERRACE PARK OH 45174-1016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06078**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2131 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ROGER STAFFORD**

Mailing Address 110 MARIAN LANE

City State Zip Code  
TERRACE PARK OH 45174-1016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06079**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. MR. ROGER STAFFORD**

Mailing Address 110 MARIAN LANE

City State Zip Code  
TERRACE PARK OH 45174-1016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06080**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MR. SHELTON STAFFORD SR.**

Mailing Address 1889 E. CHOCTAW DRIVE

City State Zip Code  
SIERRA VISTA AZ 85650-8917

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06081**

Amount of Each Receipt this Period  
101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 251.00

**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 2132 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. GLYNNE STAFSLIEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1016 RUTLEDGE COURT  
 City JANESVILLE State WI Zip Code 53545-1345  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06082**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. GLYNNE STAFSLIEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1016 RUTLEDGE COURT  
 City JANESVILLE State WI Zip Code 53545-1345  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06083**  
 Amount of Each Receipt this Period  
 101.00

**C. RICHARD STAGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 860 SCHILLING FARM RD  
 City COLLIERVILLE State TN Zip Code 38017-7042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COMERCIAL FILTERS Occupation C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06084**  
 Amount of Each Receipt this Period  
 350.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 551.00  
**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 2133 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GREG STAHL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 550 BERNARD STREET  
 City ROCHESTER State NY Zip Code 14621-5110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06085**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. SUSAN STAHL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12 DEWBERRY COURT  
 City FERNANDINA BEACH State FL Zip Code 32034-6578  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06086**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. JOHN STAIGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 116 N. ARCADIAN WAY  
 City MOORESVILLE State NC Zip Code 28117-9219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06087**  
 Amount of Each Receipt this Period  
 130.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	430.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2134 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENNETH STALLINGS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 243 SHARP POINT ROAD  
 City State Zip Code  
 MACCLESFIELD NC 27852-9568  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 B.B. & T. INFORMATION TECHNOLOGY  
 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  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06088**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. MARLIN R. STAMMER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 CHRISTAMON E.  
 City State Zip Code  
 IRVINE CA 92620-1829  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06089**  
 Amount of Each Receipt this Period  
 145.00

**C. MR. DAVID A. STAMP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 324 ELM AVE  
 City State Zip Code  
 BROOKINGS SD 57006-3220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 835.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06090**  
 Amount of Each Receipt this Period  
 350.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 795.00  
**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 2135 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID A. STAMP**  
Full Name (Last, First, Middle Initial)

Mailing Address 324 ELM AVE

City BROOKINGS State SD Zip Code 57006-3220

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **835.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 28 / 2014**

**Transaction ID : 2014M04L11AI06091**

Amount of Each Receipt this Period  
**100.00**

**B. MR. ROMAN STANCZYK JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 3535 S. BANNOCK STREET  
APARTMENT 3

City ENGLEWOOD State CO Zip Code 80110-3662

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 17 / 2014**

**Transaction ID : 2014M04L11AI06092**

Amount of Each Receipt this Period  
**200.00**

**C. MR. MICHAEL STANDEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 749 JAMESTOWN LANE

City NAPLES State FL Zip Code 34108-7568

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2014**

**Transaction ID : 2014M04L11AI06093**

Amount of Each Receipt this Period  
**500.00**

**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 2136 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. J. SPENCER STANDISH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 BEACH ROAD  
 APARTMENT 2K  
 City VERO BEACH State FL Zip Code 32963-3416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06094**  
 Amount of Each Receipt this Period  
 500.00

**B. LEON STANGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 546 WOODLAND DR.  
 City FARMINGTON State UT Zip Code 84025-3317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06095**  
 Amount of Each Receipt this Period  
 500.00

**C. MS. RITA AUDET STANIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12100 KINSLEY PLACE  
 City RESTON State VA Zip Code 20190-5832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06096**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2137 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SHANNON M. STANLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 211 NORTH VIEW DRIVE  
 City DAYTON State VA Zip Code 22821-9519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BELTONE Occupation HEARING AID SPECIALIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06097**  
 Amount of Each Receipt this Period  
 120.00

**B. MS. CATHERINE CONTEE STANSBURY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18104 BEROL DRIVE  
 City PFLUGERVILLE State TX Zip Code 78660-4928  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation STOCK ANALYST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06098**  
 Amount of Each Receipt this Period  
 100.00

**C. MS. CATHERINE CONTEE STANSBURY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18104 BEROL DRIVE  
 City PFLUGERVILLE State TX Zip Code 78660-4928  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation STOCK ANALYST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06099**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 321.00  
**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 2138 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BEVERLY STANTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 21335 N. SHOTGUN RIDGE ROAD

City PAULDEN	State AZ	Zip Code 86334-4322
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

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
03	/	18	/	2014

**Transaction ID : 2014M04L11AI06100**

Amount of Each Receipt this Period  
200.00

**B. MRS. BEVERLY STANTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 21335 N. SHOTGUN RIDGE ROAD

City PAULDEN	State AZ	Zip Code 86334-4322
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

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
03	/	19	/	2014

**Transaction ID : 2014M04L11AI06101**

Amount of Each Receipt this Period  
400.00

**C. MR. TERRY STANTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 3235 N. LAKE LEELANAU DRIVE

City LAKE LEELANAU	State MI	Zip Code 49653-9621
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
03	/	04	/	2014

**Transaction ID : 2014M04L11AI06102**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2139 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. TERRY STANTON**

Mailing Address 3235 N. LAKE LEELANAU DRIVE

City LAKE LEELANAU	State MI	Zip Code 49653-9621
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06103**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. MR. MICHAEL D. STANTON-HICKS**

Mailing Address 11405 CLEARFIELD LANE

City CHARDON	State OH	Zip Code 44024-9051
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation CONSULTANT
-------------------------------	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06104**

Amount of Each Receipt this Period  
55.00

Full Name (Last, First, Middle Initial)  
**C. MR. MICHAEL D. STANTON-HICKS**

Mailing Address 11405 CLEARFIELD LANE

City CHARDON	State OH	Zip Code 44024-9051
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation CONSULTANT
-------------------------------	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06105**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	155.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2140 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. STANLEY STAPLES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7702 RIDGE MIST DRIVE  
 City SAN ANTONIO State TX Zip Code 78239-4069  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06106**  
 Amount of Each Receipt this Period  
 121.00

**B. DR. HENRY P. STAPP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 61 OAK RIDGE ROAD  
 City BERKELEY State CA Zip Code 94705-2425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06107**  
 Amount of Each Receipt this Period  
 100.00

**C. DR. TIMOTHY STARCK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11583 PRESTWICK ROAD  
 City BELVIDERE State IL Zip Code 61008-8156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TIMOTHY STARCK Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06108**  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	721.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2141 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. DOUGLAS STARK</b>		Date of Receipt
Mailing Address 6486 FORTUNE ROAD		<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : 2014M04L11AI06109</b>
FORT WORTH	TX	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="750.00"/>
	76116-7318	
Name of Employer	Occupation	
SELF-EMPLOYED	BUSINESS OWNER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="750.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. DR. RALPH H. STARKEY</b>		Date of Receipt
Mailing Address 2588 OLD TURNPIKE ROAD		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : 2014M04L11AI06110</b>
LEWISBURG	PA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="300.00"/>
	17837-7800	
Name of Employer	Occupation	
GEISINGER MEDICAL CENTER	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. FLOYD E. STARNES</b>		Date of Receipt
Mailing Address 13113 N. CRATER LANE		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	<b>Transaction ID : 2014M04L11AI06111</b>
DUNLAP	IL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Zip Code	<input type="text" value="250.00"/>
	61525-9763	
Name of Employer	Occupation	
SHELLY LEASING, INC.	REFRIGERATION SERVICE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1300.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 2142 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. NANCY S. STARR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 RIDGEWOOD ROAD S.W.  
 City ROME State GA Zip Code 30165-4200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **241.00**

Date of Receipt: **03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI06112**  
 Amount of Each Receipt this Period: **1.00**

**B. MR. DAVID HENRY STASHIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1507 EDITH STREET  
 City BERKELEY State CA Zip Code 94703-1123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **SELF** Occupation: **COACH**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **800.00**

Date of Receipt: **03 / 14 / 2014**  
**Transaction ID : 2014M04L11AI06113**  
 Amount of Each Receipt this Period: **200.00**

**C. MR. DAVID HENRY STASHIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1507 EDITH STREET  
 City BERKELEY State CA Zip Code 94703-1123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **SELF** Occupation: **COACH**  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **800.00**

Date of Receipt: **03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI06114**  
 Amount of Each Receipt this Period: **100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **301.00**  
**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 2143 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID HENRY STASHIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1507 EDITH STREET  
 City BERKELEY State CA Zip Code 94703-1123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation COACH  
 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  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06115**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. DAVID HENRY STASHIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1507 EDITH STREET  
 City BERKELEY State CA Zip Code 94703-1123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation COACH  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06116**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JEFF STATHES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10304 DETRICK AVENUE  
 City KENSINGTON State MD Zip Code 20895-3911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06117**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2144 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDGAR L. STAUFFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3026 BOWERS MILL ROAD  
 City PENNSBURG State PA Zip Code 18073-1904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06118**  
 Amount of Each Receipt this Period 101.00

**B. MS. MARJORIE M. STAUM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3379 MILL VISTA ROAD UNIT 4413  
 City HIGHLANDS RANCH State CO Zip Code 80129-2446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06119**  
 Amount of Each Receipt this Period 101.00

**C. MR. RUSSELL D. STEAGALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 136639  
 City FORT WORTH State TX Zip Code 76136-0639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ENTERTAINER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06120**  
 Amount of Each Receipt this Period 550.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 752.00  
**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 2145 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. DAVID M. STECK</b>		Date of Receipt MM / DD / YYYY 03 / 04 / 2014 <b>Transaction ID : 2014M04L11AI06121</b>
Mailing Address 9650 MILL FIELD ROAD		Amount of Each Receipt this Period 60.00
City COLUMBIA	State SC	Zip Code 29223-7107
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation BUSINESS OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>B. MR. DAVID M. STECK</b>		Date of Receipt MM / DD / YYYY 03 / 14 / 2014 <b>Transaction ID : 2014M04L11AI06122</b>
Mailing Address 9650 MILL FIELD ROAD		Amount of Each Receipt this Period 50.00
City COLUMBIA	State SC	Zip Code 29223-7107
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation BUSINESS OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>C. MR. JOHN HOWARD STECKER</b>		Date of Receipt MM / DD / YYYY 03 / 06 / 2014 <b>Transaction ID : 2014M04L11AI06123</b>
Mailing Address 15 MOLA ROAD		Amount of Each Receipt this Period 275.00
City NORWALK	State CT	Zip Code 06851-2517
FEC ID number of contributing federal political committee. C		
Name of Employer ERNST & YOUNG, L.L.P.	Occupation C.P.A.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	385.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2146 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ELIZA STEDMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3354 CHEVY CHASE DRIVE

City HOUSTON State TX Zip Code 77019-3102

FEC ID number of contributing federal political committee. **C**

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **32400.00**

Date of Receipt: **03 / 07 / 2014**

**Transaction ID : 2014M04L11AI06124**

Amount of Each Receipt this Period: **32400.00**

**B. MR. STUART W. STEDMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3354 CHEVY CHASE

City HOUSTON State TX Zip Code 77019-3102

FEC ID number of contributing federal political committee. **C**

Name of Employer: **STEDMAN WEST INTERESTS, INC.** Occupation: **EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **32400.00**

Date of Receipt: **03 / 07 / 2014**

**Transaction ID : 2014M04L11AI06125**

Amount of Each Receipt this Period: **32400.00**

**C. MR. HOWARD L. STEELE**  
Full Name (Last, First, Middle Initial)

Mailing Address 5204 HOLDEN STREET

City FAIRFAX State VA Zip Code 22032-3418

FEC ID number of contributing federal political committee. **C**

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt: **03 / 07 / 2014**

**Transaction ID : 2014M04L11AI06126**

Amount of Each Receipt this Period: **75.00**

**SUBTOTAL** of Receipts This Page (optional)..... **64875.00**

**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 2147 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HOWARD L. STEELE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5204 HOLDEN STREET  
 City FAIRFAX State VA Zip Code 22032-3418  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06127**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. JOHN STEELE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2412 INGLESIDE AVENUE APARTMENT 6D  
 City CINCINNATI State OH Zip Code 45206-2187  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HILLTOP BASIC RESOURCES, INC. Occupation VICE CHAIR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06128**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. DENNIS MICHAEL STEEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 858 ROSASTONE TRAIL  
 City HOUSTON State TX Zip Code 77024-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06129**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2148 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SEVRIN G. STEEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8439 W KIMBERLY WAY  
 City PEORIA State AZ Zip Code 85382-8720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06130**  
 Amount of Each Receipt this Period  
 60.00

**B. MR. SEVRIN G. STEEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8439 W KIMBERLY WAY  
 City PEORIA State AZ Zip Code 85382-8720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06131**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. MARK J. STEFFEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3812 OLD JEFFERSON VALLEY ROAD  
 City SHRUB OAK State NY Zip Code 10588-1305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06132**  
 Amount of Each Receipt this Period  
 750.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	910.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2149 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. LINDA STEIDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4988 STILLMEADOW DRIVE

City HOWELL State MI Zip Code 48843-7859

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06133**

Amount of Each Receipt this Period  
 200.00

**B. MS. LINDA STEIDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4988 STILLMEADOW DRIVE

City HOWELL State MI Zip Code 48843-7859

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06134**

Amount of Each Receipt this Period  
 1.00

**C. MR. BENJAMIN J. STEIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 4539 VIA VIENTA STREET

City MALIBU State CA Zip Code 90265-2513

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ACTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06135**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 701.00

**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 2150 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL S. STEINBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5906 EDINBURGH COURT  
 City DALLAS State TX Zip Code 75252-5112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06136**  
 Amount of Each Receipt this Period  
 300.00

**B. MRS. JOAN Z. STEINBRENNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1012 S. FRANKLAND ROAD  
 City TAMPA State FL Zip Code 33629-5106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06137**  
 Amount of Each Receipt this Period  
 540.00

**C. MRS. DONNA STEINGASS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2347 TUDOR DRIVE  
 City CLEVELAND State OH Zip Code 44106-3211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06138**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1140.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2151 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JEFFREY STEINKAMP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 98  
 City ROCHESTER State VT Zip Code 05767-0098  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06139**  
 Amount of Each Receipt this Period  
 2000.00

**B. MR. JEFFREY STEINKAMP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 98  
 City ROCHESTER State VT Zip Code 05767-0098  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06140**  
 Amount of Each Receipt this Period  
 2750.00

**C. MR. PAUL A. STEINMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 186 HUMMINGBIRD LANE  
 City SOUTH BURLINGTON State VT Zip Code 05403-4448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06141**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2152 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BERTON STEIR**  
Full Name (Last, First, Middle Initial)

Mailing Address 11444 W. OLYMPIC BLVD.  
10TH FLOOR

City LOS ANGELES State CA Zip Code 90064-1557

FEC ID number of contributing federal political committee. **C**

Name of Employer ROLL INTERNATIONAL CORPORATION Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06142**

Amount of Each Receipt this Period  
250.00

**B. MR. BURL C. STEPHENS**  
Full Name (Last, First, Middle Initial)

Mailing Address 8333 GOLDEN EAGLE ROAD

City FORT COLLINS State CO Zip Code 80528-9347

FEC ID number of contributing federal political committee. **C**

Name of Employer ALASKA NATIVE TRIBAL HEALTH Occupation PHYSICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06143**

Amount of Each Receipt this Period  
300.00

**C. MRS. DOLORES STEPHENS**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 104

City MIRROR LAKE State NH Zip Code 03853-0104

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06144**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00

**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 2153 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SANDRA STEPHENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8335 HEWLETT ROAD  
 City ATLANTA State GA Zip Code 30350-3506  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06145**  
 Amount of Each Receipt this Period 250.00

**B. MS. VIRGINIA R. STEPHENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9187 SUNDERLAND WAY  
 City WEST CHESTER State OH Zip Code 45069-4031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06146**  
 Amount of Each Receipt this Period 500.00

**C. MRS. ELEANOR STEPTOE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 803 W. 2ND AVENUE  
 City MILLER State SD Zip Code 57362-1031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06147**  
 Amount of Each Receipt this Period 50.00

**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: PAGE 2154 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ADAM STERN**

Mailing Address 23673 MALIBU COLONY ROAD

City MALIBU State CA Zip Code 90265-6628

FEC ID number of contributing federal political committee. **C**

Name of Employer TABORLAKE Occupation FINANCE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06148**

Amount of Each Receipt this Period  
15000.00

Full Name (Last, First, Middle Initial)  
**B. MR. LESLIE W. STERN**

Mailing Address P.O. BOX 4051

City EDWARDS State CO Zip Code 81632-4051

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CONSULTANT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06149**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**C. MRS. DIANE STEUBER**

Mailing Address 3679 NORDSTROM LANE

City LAFAYETTE State CA Zip Code 94549-3027

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06150**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15170.00

**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 2155 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOSEPH T. STEUER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2900 14TH STREET N. #50  
 APARTMENT 145  
 City NAPLES State FL Zip Code 34103-4589  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06151**  
 Amount of Each Receipt this Period  
 225.00

**B. MRS. GLORIA STEVENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3091 HIGHLANDS BRIDGE ROAD  
 City SARASOTA State FL Zip Code 34235-6842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06152**  
 Amount of Each Receipt this Period  
 250.00

**C. DR. OWEN R. STEVENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 69 WOODS RUN  
 City ROLLINSFORD State NH Zip Code 03869-5815  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06153**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 575.00  
**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 2156 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. REX STEVENS**

Mailing Address 1808 CATTLE DRIVE

City CEDAR PARK State TX Zip Code 78613-1489

FEC ID number of contributing federal political committee. **C**

Name of Employer NET SPEND CORPORATION Occupation ACCOUNTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06154**

Amount of Each Receipt this Period  
 115.00

Full Name (Last, First, Middle Initial)  
**B. DR. CARL R. STEVENSON**

Mailing Address 3931 WEST 87TH STREET

City TULSA State OK Zip Code 74132-4138

FEC ID number of contributing federal political committee. **C**

Name of Employer ASSOC. ANES., INC. Occupation PHYSICIAN

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  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06155**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**C. MR. JIMMIE STEVENSON**

Mailing Address P.O. BOX 192

City DALHART State TX Zip Code 79022-0192

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PEST CONTROL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06156**

Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	335.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2157 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT F. STEVENSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 6940 CAMINO NUEVO MEJICO

City LAS CRUCES State NM Zip Code 88007-8950

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06157**

Amount of Each Receipt this Period  
 101.00

**B. MR. CAMPBELL STEWARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 65 ASBURY STREET

City TOPSFIELD State MA Zip Code 01983-1501

FEC ID number of contributing federal political committee. **C**

Name of Employer KONA CORPORATION Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06158**

Amount of Each Receipt this Period  
 2000.00

**C. BARBARA STEWART**  
Full Name (Last, First, Middle Initial)

Mailing Address 437 W NORTH AVE  
APT 603

City CHICAGO State IL Zip Code 60610-1830

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 16200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06159**

Amount of Each Receipt this Period  
 16200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 18301.00

**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 2158 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES TODD STEWART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2657 WINDMILL PARKWAY  
 UNIT 228  
 City Henderson State NV Zip Code 89074-3384  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PINNACLE ENTERTAINMENT Occupation VICE PRESIDENT FINANCE OPERATION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06160**  
 Amount of Each Receipt this Period 240.00

**B. MR. JAMES W. STEWART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4860 LONGCHAMPS DRIVE NE  
 City Atlanta State GA Zip Code 30319-1032  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06161**  
 Amount of Each Receipt this Period 150.00

**C. MR. DONALD WAYNE STIBBS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 302 N. HAMILTON DRIVE  
 City Buchanan State MI Zip Code 49107-8434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06162**  
 Amount of Each Receipt this Period 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	491.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2159 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. MARILYN R. STIGLITZ</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI06163</b>	
Mailing Address 232 BALTUSROL WAY		Amount of Each Receipt this Period 1100.00	
City SPRINGFIELD	State NJ	Zip Code 07081-2106	
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED	Aggregate Year-to-Date ▼ 2700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. MS. MARILYN R. STIGLITZ</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI06164</b>	
Mailing Address 232 BALTUSROL WAY		Amount of Each Receipt this Period 500.00	
City SPRINGFIELD	State NJ	Zip Code 07081-2106	
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED	Aggregate Year-to-Date ▼ 2700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. MS. HELEN KAY STILES</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 05 / 2014 <b>Transaction ID : 2014M04L11AI06165</b>	
Mailing Address 8090 STILES RANCH ROAD		Amount of Each Receipt this Period 500.00	
City WHEELER	State TX	Zip Code 79096-7724	
FEC ID number of contributing federal political committee. C			
Name of Employer FLYING L. MANAGEMENT INC.	Occupation OFFICE MANAGER	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2100.00
<b>TOTAL</b> This Period (last page this line number only).....	2100.00

**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 2160 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. HELEN KAY STILES**

Mailing Address 8090 STILES RANCH ROAD

City WHEELER	State TX	Zip Code 79096-7724
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FLYING L. MANAGEMENT INC.	Occupation OFFICE MANAGER
---	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI06166**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. DR. JOHN STIMLER**

Mailing Address 2279 SEMINOLE RD #5

City ATLANTIC BEACH	State FL	Zip Code 32233-5947
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer BETTINGER STIMLER AND ASSOCIATES	Occupation EMERGENCY PHYSICIAN
--	-----------------------------------

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
03	/	14	/	2014

**Transaction ID : 2014M04L11AI06167**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**C. MR. CHARLES PRYOR STINGLEY**

Mailing Address 3658 HARVEYSBURG ROAD

City WAYNESVILLE	State OH	Zip Code 45068-9419
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2014

**Transaction ID : 2014M04L11AI06168**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2161 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL STINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 981 HWY 98 E.  
 #3110  
 City DESTIN State FL Zip Code 32541-2584  
 Name of Employer RETIRED Occupation NURSE PRACTITIONER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06169**  
 Amount of Each Receipt this Period 1.00

**B. MR. MICHAEL STINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 981 HWY 98 E.  
 #3110  
 City DESTIN State FL Zip Code 32541-2584  
 Name of Employer RETIRED Occupation NURSE PRACTITIONER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06170**  
 Amount of Each Receipt this Period 50.00

**C. MR. JOHN T. STIRRUP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7801 DEERWOOD POINT COURT  
 City JACKSONVILLE State FL Zip Code 32256-2821  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06171**  
 Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 351.00  
**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 2162 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. RUTH ANN STITES**  
Full Name (Last, First, Middle Initial)

Mailing Address 12050 E. COUNTY ROAD 50 S.

City PARKER CITY State IN Zip Code 47368-9403

FEC ID number of contributing federal political committee. **C**

Name of Employer PARKER VET CLINIC Occupation OFFICE MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06172**

Amount of Each Receipt this Period  
 250.00

**B. MR. JAMES P. STOCKING**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 98

City REHRERSBURG State PA Zip Code 19550-0098

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation DESK CLERK

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06173**

Amount of Each Receipt this Period  
 10.00

**C. MR. JAMES P. STOCKING**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 98

City REHRERSBURG State PA Zip Code 19550-0098

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation DESK CLERK

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06174**

Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	270.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2163 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES P. STOCKING**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 98

City REHRERSBURG State PA Zip Code 19550-0098

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation DESK CLERK

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06175**

Amount of Each Receipt this Period  
 10.00

**B. MR. JAMES P. STOCKING**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 98

City REHRERSBURG State PA Zip Code 19550-0098

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation DESK CLERK

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06176**

Amount of Each Receipt this Period  
 10.00

**C. MR. JAMES P. STOCKING**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 98

City REHRERSBURG State PA Zip Code 19550-0098

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation DESK CLERK

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06177**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00

**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 2164 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES P. STOCKING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 98  
 City REHRERSBURG State PA Zip Code 19550-0098  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation DESK CLERK  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06178**  
 Amount of Each Receipt this Period  
 11.00

**B. MR. GEORGE STOFAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 TIMBERLINE DRIVE  
 City JOLIET State IL Zip Code 60431-4829  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06179**  
 Amount of Each Receipt this Period  
 121.00

**C. MR. RICHARD G. STOLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5162 PRINCETON AVENUE  
 City WESTMINSTER State CA Zip Code 92683-2751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06180**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	252.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2165 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LARRY W. STOLLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1998 RIVA RIDGE  
 City SAN ANTONIO State TX Zip Code 78248-1141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06181**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. DALE V. STOLZENBURG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address H.C. 72 BOX 10  
 City CROOKSTON State NE Zip Code 69212-9706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CATTLE RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06182**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. EDWARD L. STONE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6406 DUNNAVANT PLACE  
 City HUNTSVILLE State AL Zip Code 35806-5004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MACRO INDUSTRIES Occupation PROGRAM MANAGEMENT  
 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  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06183**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2166 OF 2949  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. EDWARD L. STONE**

Mailing Address **6406 DUNNAVANT PLACE**

City <b>HUNTSVILLE</b>	State <b>AL</b>	Zip Code <b>35806-5004</b>
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>MACRO INDUSTRIES</b>	Occupation <b>PROGRAM MANAGEMENT</b>
---	---

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
03	/	19	/	2014

**Transaction ID : 2014M04L11AI06184**

Amount of Each Receipt this Period  

100.00
--------

Full Name (Last, First, Middle Initial)  
**B. JERE STONE**

Mailing Address **489 LIBERTY HWY**

City <b>PUTNAM</b>	State <b>CT</b>	Zip Code <b>06260-2721</b>
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

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
03	/	24	/	2014

**Transaction ID : 2014M04L11AI06185**

Amount of Each Receipt this Period  

100.00
--------

Full Name (Last, First, Middle Initial)  
**C. MS. JOAN STONE**

Mailing Address **30 BOKUM ROAD  
UNIT 169**

City <b>ESSEX</b>	State <b>CT</b>	Zip Code <b>06426-1544</b>
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>ATHLETE</b>
--	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2014

**Transaction ID : 2014M04L11AI06186**

Amount of Each Receipt this Period  

100.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2167 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ROBERT STONE**

Mailing Address 4312 HANOVER STREET

City State Zip Code  
DALLAS TX 75225-6748

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06187**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT B. STONE**

Mailing Address 7634 E. BONNIE ROSE AVENUE

City State Zip Code  
SCOTTSDALE AZ 85250-6825

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06188**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. MR. THOMAS J. STOREY**

Mailing Address 10101 AUSTRIAN WAY

City State Zip Code  
OAK PARK MI 48237-1879

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED VICE PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06189**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00

**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 2168 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DOUGLAS L. STORHOFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 905 THORNBERRY CREEK DRIVE  
 City ONEIDA State WI Zip Code 54155-8621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PRO ACTIVE SOLUTIONS, U.S.A. L.L.C. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **245.00**

Date of Receipt **03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI06190**  
 Amount of Each Receipt this Period **120.00**

**B. MR. DOUGLAS L. STORHOFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 905 THORNBERRY CREEK DRIVE  
 City ONEIDA State WI Zip Code 54155-8621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PRO ACTIVE SOLUTIONS, U.S.A. L.L.C. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **245.00**

Date of Receipt **03 / 11 / 2014**  
**Transaction ID : 2014M04L11AI06191**  
 Amount of Each Receipt this Period **125.00**

**C. MR. RICHARD D STORMONT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3747 PEACHTREE ROAD NE SUITE 723  
 City ATLANTA State GA Zip Code 30319-1330  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **201.00**

Date of Receipt **03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI06192**  
 Amount of Each Receipt this Period **201.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>446.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2169 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SUE STORY**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 562

City VINE GROVE State KY Zip Code 40175-0562

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06193**

Amount of Each Receipt this Period  
 120.00

**B. MR. ROBERT LESLIE STOTT JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 129 ISLAND CREEK DRIVE

City VERO BEACH State FL Zip Code 32963-3302

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06194**

Amount of Each Receipt this Period  
 2500.00

**C. MS. ROXANNE L. STOVER**  
Full Name (Last, First, Middle Initial)

Mailing Address 48W224 WELTER RD.

City VIRGIL State IL Zip Code 60151-8465

FEC ID number of contributing federal political committee. **C**

Name of Employer REMAZ GREAT AMERICA NORTH Occupation REALTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 515.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06195**

Amount of Each Receipt this Period  
 515.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3135.00

**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 2170 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BARRY STOWE**  
Full Name (Last, First, Middle Initial)

Mailing Address 20 INVERARAY

City NASHVILLE State TN Zip Code 37215-4129

FEC ID number of contributing federal political committee. **C**

Name of Employer PRUDENTIAL CORPORATION ASIA Occupation INSURANCE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32400.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06196**

Amount of Each Receipt this Period  
32400.00

**B. MR. GARY E. STRADLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 610 HAMILTON CIRCLE

City HARRISBURG State PA Zip Code 17111-3531

FEC ID number of contributing federal political committee. **C**

Name of Employer COMMONWEALTH OF PA Occupation CLERICAL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06197**

Amount of Each Receipt this Period  
111.00

**C. MR. WALTER W. STRAUB**  
Full Name (Last, First, Middle Initial)

Mailing Address 4 SUMMIT

City IRVINE State CA Zip Code 92603-3625

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
261.00

Date of Receipt  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06198**

Amount of Each Receipt this Period  
260.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 32771.00

**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 2171 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. WALTER W. STRAUB**

Mailing Address 4 SUMMIT

City State Zip Code  
IRVINE CA 92603-3625

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06199**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**B. MR. ALVIN STREDER**

Mailing Address 5267 SPICEWOOD LANE

City State Zip Code  
FRISCO TX 75034-5100

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
404.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06200**

Amount of Each Receipt this Period  
204.00

Full Name (Last, First, Middle Initial)  
**C. MS. MARGARET C. STRICKLAND**

Mailing Address 684 WADDINGTON ROAD

City State Zip Code  
BLOOMFIELD VILLAGE MI 48301-2345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06201**

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 605.00

**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 2172 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. THERESIA STRIEDINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 452  
 City FRANKLINTON State NC Zip Code 27525-0452  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EUROPEAN WOODWORKING MACHINERY C Occupation VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06202**  
 Amount of Each Receipt this Period  
 100.00

**B. MS. LAUREN D. STRIKER RAPP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1000 WEST 11TH STREET  
 City KEARNEY State NE Zip Code 68845-6502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 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  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06203**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. THOMAS ANDREW STRILKO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2717 GENOA DRIVE  
 City NEW LENOX State IL Zip Code 60451-9230  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CARIS LIFE SCIENCES Occupation SALES DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06204**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2173 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TEDDY LYNN STROBEHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9082 HIGHGROVE COURT  
 City GRAND BLANC State MI Zip Code 48439-9448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BOEHLE CHEMICALS Occupation MANAGER  
 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  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06205**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. CARL L. STRODTMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2451 RED MAPLE DRIVE S.E.  
 City GRAND RAPIDS State MI Zip Code 49512-9100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06206**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JOHN R. STROPP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 DURBAN COURT  
 City COLLEGE STATION State TX Zip Code 77845-4531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06207**  
 Amount of Each Receipt this Period  
 251.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 651.00  
**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 2174 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. CHARLES STROUD</b>		Date of Receipt
Mailing Address 124 APPALACHIAN DRIVE		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City State Zip Code DAYTON TN 37321-5938		<b>Transaction ID : 2014M04L11AI06208</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="275.00"/>
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="275.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. DOUG STROUP</b>		Date of Receipt
Mailing Address 34 ROCKY RIDGE ROAD		<input type="text" value="03"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City State Zip Code ARNOLDSVILLE GA 30619-1600		<b>Transaction ID : 2014M04L11AI06209</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="101.00"/>
Name of Employer SELF-EMPLOYED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="201.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. RICHARD EUGENE STROUP</b>		Date of Receipt
Mailing Address 793 STAHLMAN DRIVE		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code BULLHEAD CITY AZ 86442-6454		<b>Transaction ID : 2014M04L11AI06210</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="230.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="401.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 2175 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD EUGENE STROUP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 793 STAHLMAN DRIVE  
 City BULLHEAD CITY State AZ Zip Code 86442-6454  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06211**  
 Amount of Each Receipt this Period  
 31.00

**B. MRS. MARIE STUART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 VILLAGE PLACE #314  
 City LONGWOOD State FL Zip Code 32779-5975  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06212**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. MARIE STUART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 VILLAGE PLACE #314  
 City LONGWOOD State FL Zip Code 32779-5975  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06213**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	232.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 2176 OF 2949	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL L. STUART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 145 STATE HIGHWAY RB  
 City LAMPE State MO Zip Code 65681-6287  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHARMACIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06214**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. PAUL W. STUART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 E. 9 MILE ROAD  
 City FERNDALE State MI Zip Code 48220-2828  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06215**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. JOHN R. STUCKEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18468 E. 600 N. ROAD  
 City BLOOMINGTON State IL Zip Code 61705-5778  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06216**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2177 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SANDI STUDDERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 264 W. DETWEILLER DRIVE  
 City PEORIA State IL Zip Code 61615-2113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation DESIGNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06217**  
 Amount of Each Receipt this Period 120.00

**B. MR. DWAIN H. STUFFLEBEAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 580  
 City BLACKFOOT State ID Zip Code 83221-0580  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FIRST AMERICAN TITLE COMPANY Occupation C. E. O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06218**  
 Amount of Each Receipt this Period 500.00

**C. DR. DAVID B. STUHLBREHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3228 HEDBACK WAY  
 City INDIANAPOLIS State IN Zip Code 46220-7711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UROLOGY OF INDIANAPOLIS Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06219**  
 Amount of Each Receipt this Period 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1120.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2178 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. TODD STULTZ**

Mailing Address 8505 TIMBER TRAIL

City BRECKSVILLE State OH Zip Code 44141-1771

FEC ID number of contributing federal political committee. **C**

Name of Employer QUITN FOUNDATION Occupation NERUOLOGIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06220**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. MR. GARY STUMBAUGH**

Mailing Address 8 RUFFIAN ROAD

City AIKEN State SC Zip Code 29803-5660

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06221**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**C. MR. GARY A. STURA**

Mailing Address 1717 LINCOLN AVENUE

City MOUNT DORA State FL Zip Code 32757-4110

FEC ID number of contributing federal political committee. **C**

Name of Employer HALLMARK Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2001.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06222**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1501.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2179 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GARY A. STURA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1717 LINCOLN AVENUE  
 City MOUNT DORA State FL Zip Code 32757-4110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HALLMARK Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2001.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06223**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. MATT STURGES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 PATRIOT LANE  
 City WHITMAN State MA Zip Code 02382-2380  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BOSTON PUBLIC SCHOOLS Occupation EDUCATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06224**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. MATT STURGES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 PATRIOT LANE  
 City WHITMAN State MA Zip Code 02382-2380  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BOSTON PUBLIC SCHOOLS Occupation EDUCATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06225**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 221.00  
**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 2180 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM C. STUTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 455 COCONUT PALM ROAD  
 City VERO BEACH State FL Zip Code 32963-3710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06226**  
 Amount of Each Receipt this Period  
 300.00

**B. MS. AMY STYCZYNSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5912 ORCHID LANE  
 City DALLAS State TX Zip Code 75230-4026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer J.P. MORGAN Occupation INVESTMENT CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06227**  
 Amount of Each Receipt this Period  
 500.00

**C. MS. CATHERINE STYZA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2023 SPRINGBROOK SOUTH  
 City WAUKESHA State WI Zip Code 53186-1200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RYAN ROAD STORAGE, LLC Occupation OWNER/PROPERTY MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06228**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2181 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JUAN SUAREZ**

Mailing Address 5450 SW 8TH STREET  
SUITE 204

City State Zip Code  
CORAL GABLES FL 33134-2200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06229**

Amount of Each Receipt this Period  
375.00

Full Name (Last, First, Middle Initial)  
**B. MR. PREDRAG SUBOTIC**

Mailing Address 8662 MIDLAND PKWY

City State Zip Code  
JAMAICA NY 11432-3042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06230**

Amount of Each Receipt this Period  
405.00

Full Name (Last, First, Middle Initial)  
**C. MR. PREDRAG SUBOTIC**

Mailing Address 8662 MIDLAND PKWY

City State Zip Code  
JAMAICA NY 11432-3042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06231**

Amount of Each Receipt this Period  
20.00

**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 2182 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PREDRAG SUBOTIC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8662 MIDLAND PKWY  
 City JAMAICA State NY Zip Code 11432-3042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06232**  
 Amount of Each Receipt this Period  
 30.00

**B. MR. ROBERT W. SUDBRINK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3100 NE 47TH COURT APARTMENT 403  
 City FORT LAUDERDALE State FL Zip Code 33308-5360  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06233**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. WILLIAM G. SUDHAUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 942 GAINSWAY ROAD  
 City YARDLEY State PA Zip Code 19067-3072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06234**  
 Amount of Each Receipt this Period  
 106.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 256.00  
**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 2183 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM G. SUDHAUS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 942 GAINSWAY ROAD  
 City YARDLEY State PA Zip Code 19067-3072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06235**  
 Amount of Each Receipt this Period 101.00

**B. MRS. JUDITH SUDNIKOVICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1171  
 City SITKA State AK Zip Code 99835-1171  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06236**  
 Amount of Each Receipt this Period 600.00

**C. COL. CHARLES L. SUES U.S.A. (RE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2710 SAILORS WAY  
 City NAPLES State FL Zip Code 34109-7624  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06237**  
 Amount of Each Receipt this Period 1100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1801.00  
**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 2184 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANK P. SUESS**  
Full Name (Last, First, Middle Initial)

Mailing Address 17187 GULF PINE CIRCLE

City Wellington State FL Zip Code 33414-6354

FEC ID number of contributing federal political committee. **C**

Name of Employer PRESCRIPTIONS PLUS, INC. Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06238**

Amount of Each Receipt this Period  
 1000.00

**B. MRS. LAURA SUFFIELD**  
Full Name (Last, First, Middle Initial)

Mailing Address 801 ROCKY RIVER ROAD

City HOUSTON State TX Zip Code 77056-2105

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06239**

Amount of Each Receipt this Period  
 220.00

**C. MR. FRANK C. SULLIVAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 27320 LAKE RD

City BAY VILLAGE State OH Zip Code 44140-2070

FEC ID number of contributing federal political committee. **C**

Name of Employer R.P.M. INTERNATIONAL, INC. Occupation CHAIRMAN & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06240**

Amount of Each Receipt this Period  
 15000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	16220.00
<b>TOTAL</b> This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2185 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES A. SULLIVAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 440 W. ANTHONY DRIVE

City CHAMPAIGN State IL Zip Code 61822-1249

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06241**

Amount of Each Receipt this Period  
 500.00

**B. MR. JOHN M. SULLIVAN JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 192 GOMEZ ROAD

City HOBE SOUND State FL Zip Code 33455-2513

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN SILK MILLS CORP. Occupation C.O.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06242**

Amount of Each Receipt this Period  
 500.00

**C. MR. JOHN M. SULLIVAN JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 192 GOMEZ ROAD

City HOBE SOUND State FL Zip Code 33455-2513

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN SILK MILLS CORP. Occupation C.O.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06243**

Amount of Each Receipt this Period  
 750.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2186 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN M. SULLIVAN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 192 GOMEZ ROAD  
 City HOBE SOUND State FL Zip Code 33455-2513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AMERICAN SILK MILLS CORP. Occupation C.O.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06244**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. STEPHEN F. SULLIVAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9 ROCKLAND FARM  
 City SOUTH DARTMOUTH State MA Zip Code 02748-3711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06245**  
 Amount of Each Receipt this Period  
 2000.00

**C. MRS. SUE SULLIVAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15025 CROWN DRIVE  
 City MINNETONKA State MN Zip Code 55345-3606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06246**  
 Amount of Each Receipt this Period  
 220.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2720.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2187 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ZAHIDA J. SULTAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6602 DUTCH JOHN CIRCLE  
 City RICHMOND State TX Zip Code 77469-8359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **220.00**

Date of Receipt: **03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI06247**  
 Amount of Each Receipt this Period: **100.00**

**B. MS. ZAHIDA J. SULTAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6602 DUTCH JOHN CIRCLE  
 City RICHMOND State TX Zip Code 77469-8359  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **220.00**

Date of Receipt: **03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI06248**  
 Amount of Each Receipt this Period: **120.00**

**C. MR. LEWIS A. SUMBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 4284  
 City CHATTANOOGA State TN Zip Code 37405-0284  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1012.00**

Date of Receipt: **03 / 12 / 2014**  
**Transaction ID : 2014M04L11AI06249**  
 Amount of Each Receipt this Period: **120.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>340.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2188 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LEWIS A. SUMBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 4284

City CHATTANOOGA	State TN	Zip Code 37405-0284
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1012.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06250**

Amount of Each Receipt this Period  
120.00

**B. MR. LEWIS A. SUMBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 4284

City CHATTANOOGA	State TN	Zip Code 37405-0284
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1012.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06251**

Amount of Each Receipt this Period  
40.00

**C. MR. LEWIS A. SUMBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 4284

City CHATTANOOGA	State TN	Zip Code 37405-0284
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1012.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06252**

Amount of Each Receipt this Period  
7.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	167.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2189 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LEWIS A. SUMBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 4284  
 City CHATTANOOGA State TN Zip Code 37405-0284  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1012.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06253**  
 Amount of Each Receipt this Period  
 115.00

**B. DR. RONALD G. SUMMERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 106 GREENS VIEW DRIVE  
 City CARY State NC Zip Code 27518-9751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06254**  
 Amount of Each Receipt this Period  
 220.00

**C. MRS. MARGARET SUMMERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1200 2ND STREET SW UNIT 110  
 City CLARION State IA Zip Code 50525-2083  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06255**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	445.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2190 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARGARET SUMNERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1200 2ND STREET SW  
 UNIT 110  
 City CLARION State IA Zip Code 50525-2083  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06256**  
 Amount of Each Receipt this Period  
 35.00

**B. MRS. MARGARET SUMNERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1200 2ND STREET SW  
 UNIT 110  
 City CLARION State IA Zip Code 50525-2083  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06257**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. MARGARET SUMNERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1200 2ND STREET SW  
 UNIT 110  
 City CLARION State IA Zip Code 50525-2083  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06258**  
 Amount of Each Receipt this Period  
 111.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 196.00  
**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 2191 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICKEY U. SUNAMOTO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10414 SCRIPPS TRL  
 City SAN DIEGO State CA Zip Code 92131-2336  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HM ELECTRONICS Occupation VP OF MANUFACTURING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06259**  
 Amount of Each Receipt this Period 230.00

**B. MR. JOHN H. SUNDSTROM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 405 ROSENEATH ROAD  
 City RICHMOND State VA Zip Code 23221-2341  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06260**  
 Amount of Each Receipt this Period 100.00

**C. MR. JEROME J. SURAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 44856 S. EL MACERO DRIVE  
 City EL MACERO State CA Zip Code 95618-1037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06261**  
 Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 380.00  
**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 2192 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. GARY SUTTON</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI06262</b>		
Mailing Address 2213 SHARI LANE			Amount of Each Receipt this Period 1000.00		
City GARLAND	State TX	Zip Code 75043-1462			
FEC ID number of contributing federal political committee. C					
Name of Employer VAR RESOURCES, INC.		Occupation C.E.O.			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1050.00			

Full Name (Last, First, Middle Initial) <b>B. MR. GARY SUTTON</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI06263</b>		
Mailing Address 2213 SHARI LANE			Amount of Each Receipt this Period 50.00		
City GARLAND	State TX	Zip Code 75043-1462			
FEC ID number of contributing federal political committee. C					
Name of Employer VAR RESOURCES, INC.		Occupation C.E.O.			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1050.00			

Full Name (Last, First, Middle Initial) <b>C. MR. GARY ALLEN SUTTON</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 11 / 2014 <b>Transaction ID : 2014M04L11AI06264</b>		
Mailing Address 3815 W. SAGUARO PARK LANE			Amount of Each Receipt this Period 120.00		
City GLENDALE	State AZ	Zip Code 85310-3341			
FEC ID number of contributing federal political committee. C					
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1170.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2193 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY R. SUTTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 6917 AVONDALE DRIVE

City SHREVEPORT State LA Zip Code 71107-9617

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06265**

Amount of Each Receipt this Period  
120.00

**B. MRS. MARY R. SUTTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 6917 AVONDALE DRIVE

City SHREVEPORT State LA Zip Code 71107-9617

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt  
03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06266**

Amount of Each Receipt this Period  
102.00

**C. STEPHEN SUTTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 251 HOOVER AVE.

City VENTURA State CA Zip Code 93003-2530

FEC ID number of contributing federal political committee. **C**

Name of Employer NOT EMPLOYED Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06267**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 522.00

**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 2194 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. F JOSEPH SVEC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 266 CHEESTANA WAY  
 City LOUDON State TN Zip Code 37774-2527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06268**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. LOYD B. SWADELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 525 W. EL NORTE PARKWAY SPACE 132  
 City ESCONDIDO State CA Zip Code 92026-3912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06269**  
 Amount of Each Receipt this Period  
 20.00

**C. MRS. LOYD B. SWADELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 525 W. EL NORTE PARKWAY SPACE 132  
 City ESCONDIDO State CA Zip Code 92026-3912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06270**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	320.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2195 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LOYD B. SWADELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 525 W. EL NORTE PARKWAY  
 SPACE 132  
 City ESCONDIDO State CA Zip Code 92026-3912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06271**  
 Amount of Each Receipt this Period  
 20.00

**B. MRS. LOYD B. SWADELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 525 W. EL NORTE PARKWAY  
 SPACE 132  
 City ESCONDIDO State CA Zip Code 92026-3912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06272**  
 Amount of Each Receipt this Period  
 56.00

**C. MR. ROBERT R. SWAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4051 S. BYRON BUTLER PARKWAY  
 City PERRY State FL Zip Code 32348-6704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06273**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 196.00  
**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 2196 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM C. SWANK**  
Full Name (Last, First, Middle Initial)

Mailing Address 5800 FOREST HILLS BLVD  
APT D109

City COLUMBUS State OH Zip Code 43231-2941

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06274**

Amount of Each Receipt this Period  
225.00

**B. MR. KENT SWANSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 28 PARRISH HILL DRIVE

City NASHUA State NH Zip Code 03063-2717

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation INTERNATIONAL PROGRAM DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
931.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06275**

Amount of Each Receipt this Period  
50.00

**C. MR. KENT SWANSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 28 PARRISH HILL DRIVE

City NASHUA State NH Zip Code 03063-2717

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation INTERNATIONAL PROGRAM DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
931.00

Date of Receipt  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06276**

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 425.00

**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 2197 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENT SWANSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 28 PARRISH HILL DRIVE  
 City NASHUA State NH Zip Code 03063-2717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation INTERNATIONAL PROGRAM DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 931.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06277**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. KENT SWANSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 28 PARRISH HILL DRIVE  
 City NASHUA State NH Zip Code 03063-2717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation INTERNATIONAL PROGRAM DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 931.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06278**  
 Amount of Each Receipt this Period  
 150.00

**C. MR. KENT SWANSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 28 PARRISH HILL DRIVE  
 City NASHUA State NH Zip Code 03063-2717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation INTERNATIONAL PROGRAM DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 931.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06279**  
 Amount of Each Receipt this Period  
 151.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	421.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2198 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROGER L. SWANSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2089 COUNTY ROAD 15  
 City COLON State NE Zip Code 68018-4025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06280**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. STEVEN RAY SWANSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11748 N. 2200TH AVENUE  
 City GENESEO State IL Zip Code 61254-4700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06281**  
 Amount of Each Receipt this Period  
 250.00

**C. MS. WANDA J. R. SWANSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 402 W. MILLER ROAD  
 City STERLING State IL Zip Code 61081-1147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06282**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2199 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. WANDA J. R. SWANSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 402 W. MILLER ROAD  
 City STERLING State IL Zip Code 61081-1147  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06283**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. JUDITH B. SWARTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 500 S.E. 5TH AVENUE APARTMENT 902S  
 City BOCA RATON State FL Zip Code 33432-5590  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06284**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. GARY SWEARINGEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5500 LUNA DEL ORO COURT N.E.  
 City ALBUQUERQUE State NM Zip Code 87111-1646  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06285**  
 Amount of Each Receipt this Period  
 380.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 980.00  
**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 2200 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENNETH J. SWEET**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4045 S. 54TH STREET  
 City MILWAUKEE State WI Zip Code 53220-2613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06286**  
 Amount of Each Receipt this Period 30.00

**B. MR. KENNETH J. SWEET**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4045 S. 54TH STREET  
 City MILWAUKEE State WI Zip Code 53220-2613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06287**  
 Amount of Each Receipt this Period 56.00

**C. MR. ROBERT SWENSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 105 LAUREL RIDGE PLACE  
 City HENDERSONVILLE State NC Zip Code 28739-5820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06288**  
 Amount of Each Receipt this Period 121.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 207.00  
**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 2201 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. VIRGINIA SWIFT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 53 ARAN ROAD  
 City WESTWOOD State MA Zip Code 02090-2209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06289**  
 Amount of Each Receipt this Period  
 105.00

**B. MRS. VIRGINIA SWIFT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 53 ARAN ROAD  
 City WESTWOOD State MA Zip Code 02090-2209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06290**  
 Amount of Each Receipt this Period  
 106.00

**C. MR. ROBERT F. SYKES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 60 BROOKSIDE DRIVE  
 City ROCHESTER State NY Zip Code 14618-3422  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06291**  
 Amount of Each Receipt this Period  
 2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2211.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2202 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. W. STUART SYKES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1005 COLUMBIA ROAD  
 City MADISON State WI Zip Code 53705-2105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1655.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06292**  
 Amount of Each Receipt this Period 1655.00

**B. MRS. CAROLYN KYLE SYMES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6102 HORSEMANS CANYON DRIVE  
 City WALNUT CREEK State CA Zip Code 94595-4304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06293**  
 Amount of Each Receipt this Period 200.00

**C. MRS. CAROLYN KYLE SYMES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6102 HORSEMANS CANYON DRIVE  
 City WALNUT CREEK State CA Zip Code 94595-4304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06294**  
 Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2055.00  
**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 2203 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. A. E. SYMONS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1415 MARK TWAIN DR.  
 City CENTRALIA State WA Zip Code 98531-8893  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06295**  
 Amount of Each Receipt this Period  
 245.00

**B. MR. DENNIS R. SYMONS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 NATALIE DRIVE  
 City BUDD LAKE State NJ Zip Code 07828-1017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06296**  
 Amount of Each Receipt this Period  
 30.00

**C. MR. DENNIS R. SYMONS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 NATALIE DRIVE  
 City BUDD LAKE State NJ Zip Code 07828-1017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06297**  
 Amount of Each Receipt this Period  
 215.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 490.00  
**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 2204 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. PEARL C. T. SZE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 2561  
 City NEWPORT BEACH State CA Zip Code 92659-1561  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06298**  
 Amount of Each Receipt this Period  
 101.00

**B. DR. BARBARA ANN SZIRAKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1957 COMSTOCK AVENUE  
 City LOS ANGELES State CA Zip Code 90025-5108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PSYCHOLOGIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06299**  
 Amount of Each Receipt this Period  
 100.00

**C. DR. PHILIP D. SZOLD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6529 CAMINITO ESTRALLADO  
 City SAN DIEGO State CA Zip Code 92120-3024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06300**  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1201.00  
**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 2205 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. REV. EDMUND L. SZPIEG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 930 SW TUNIS AVENUE  
 City PORT ST LUCIE State FL Zip Code 34953-3351  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ST. ELIZABETH ANN SETON Occupation PASTOR  
 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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06301**  
 Amount of Each Receipt this Period  
 100.00

**B. JOANM SZULCZEWSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9100 BON AIR CROSSINGS DR. APT 119  
 City N. CHESTERFIELD State VA Zip Code 23235-4979  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation TAX PREPARARTIOM  
 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  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06302**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. BERNARD FRANK SZYMANSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7822 BEN ROSE LANE NORTH LITTLE ROCK  
 City NORTH LITTLE ROCK State AR Zip Code 72118-1320  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer V. A. MED CENTER Occupation IT SPECIALIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06303**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2206 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARK TAFT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 319 HAGEMAN ROAD  
 City KELSO State WA Zip Code 98626-9103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RESTAURANT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06304**  
 Amount of Each Receipt this Period  
**250.00**

**B. MR. PETER TAGGART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 74 BLACKBURN ROAD  
 City SUMMIT State NJ Zip Code 07901-2409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06305**  
 Amount of Each Receipt this Period  
**500.00**

**C. DR. EARL P. TAITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 783  
 City SAN GABRIEL State CA Zip Code 91778-0783  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06306**  
 Amount of Each Receipt this Period  
**110.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>860.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2207 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MITSUE TAKAHASHI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6641 SULTANA DR  
 City LIVINGSTON State CA Zip Code 95334-9733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06307**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. BYRON M. TAKESHITA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2358 ROSCOMMON AVENUE  
 City MONTEREY PARK State CA Zip Code 91754-6045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06308**  
 Amount of Each Receipt this Period  
 121.00

**C. MRS. MARY L. TALBERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1916 SOUTHSORE  
 City BENTON State AR Zip Code 72015-2848  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06309**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 321.00  
**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 2208 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY L. TALBERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1916 SOUTHSORE  
 City BENTON State AR Zip Code 72015-2848  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06310**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. MARY L. TALBERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1916 SOUTHSORE  
 City BENTON State AR Zip Code 72015-2848  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06311**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. DAVID TALLANT JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 450 SOUTH AVENUE  
 City GLENCOE State IL Zip Code 60022-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06312**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 401.00  
**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 2209 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID TALLANT JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 450 SOUTH AVENUE  
 City GLENCOE State IL Zip Code 60022-1606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06313**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. GREGORY G. TALLAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 123 W. OAK STREET APARTMENT Q.  
 City CHICAGO State IL Zip Code 60610-5415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06314**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. FREDERICK E. TALLMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 142  
 City NORTHFIELD FALLS State VT Zip Code 05664-0142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NORWICH UNIVERSITY Occupation TEACHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06315**  
 Amount of Each Receipt this Period  
 270.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1020.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2210 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RUSSELL FRANK TANNEHILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 38647 KYLE PLACE  
 City PALMDALE State CA Zip Code 93551-5430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06316**  
 Amount of Each Receipt this Period 100.00

**B. MR. JOSEPH D. TANNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5939 HIGHWAY 155 N.  
 City STOCKBRIDGE State GA Zip Code 30281-1830  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JOE TANNER & ASSOCIATES Occupation CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06317**  
 Amount of Each Receipt this Period 1000.00

**C. MRS. JUNE TANNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1052  
 City DOUGLAS State GA Zip Code 31534-1052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06318**  
 Amount of Each Receipt this Period 225.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2211 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARILYN TANNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 726 STATE ROUTE 40  
 City SPEER State IL Zip Code 61479-9515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06319**  
 Amount of Each Receipt this Period  
**300.00**

**B. MRS. MARTY C. TANNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2108 TRIGGERFISH RUN  
 City THE VILLAGES State FL Zip Code 32162-3235  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06320**  
 Amount of Each Receipt this Period  
**1000.00**

**C. MR. MAX H. TANNER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4128 WALNUT MEADOW LANE  
 City DALLAS State TX Zip Code 75229-6269  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **220.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06321**  
 Amount of Each Receipt this Period  
**110.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1410.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2212 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SHARON ELIZABETH TANNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 7041 FORESTREE LANE

City OKLAHOMA CITY State OK Zip Code 73150-5912

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 03 / 18 / 2014  
Transaction ID : 2014M04L11AI06322

Amount of Each Receipt this Period 110.00

**B. MRS. SHARON ELIZABETH TANNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 7041 FORESTREE LANE

City OKLAHOMA CITY State OK Zip Code 73150-5912

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 03 / 18 / 2014  
Transaction ID : 2014M04L11AI06323

Amount of Each Receipt this Period 120.00

**C. MS. CAROLYN TANZOLA**  
Full Name (Last, First, Middle Initial)

Mailing Address 6451 FIREBRAND STREET

City LOS ANGELES State CA Zip Code 90045-1208

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 24 / 2014  
Transaction ID : 2014M04L11AI06324

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 480.00

**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 2213 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. MICHAEL J. TAPERT**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 330

City CHARLESTON State SC Zip Code 29402-0330

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06325**

Amount of Each Receipt this Period  
 300.00

**B. MS. LISA G. TARANTINO**  
Full Name (Last, First, Middle Initial)

Mailing Address 1076 BEL MARIN KEYS BLVD.

City NOVATO State CA Zip Code 94949-5335

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06326**

Amount of Each Receipt this Period  
 110.00

**C. RICK TARIF**  
Full Name (Last, First, Middle Initial)

Mailing Address JULIS VILLAGE

City BY A State WA Zip Code 24980

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06327**

Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 435.00

**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 2214 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. RICK TARIF**  
Full Name (Last, First, Middle Initial)

Mailing Address JULIS VILLAGE

City BY A State WA Zip Code 24980

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **335.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 12 / 2014**  
**Transaction ID : 2014M04L11AI06328**

Amount of Each Receipt this Period  
**25.00**

**B. RICK TARIF**  
Full Name (Last, First, Middle Initial)

Mailing Address JULIS VILLAGE

City BY A State WA Zip Code 24980

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **335.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI06329**

Amount of Each Receipt this Period  
**25.00**

**C. RICK TARIF**  
Full Name (Last, First, Middle Initial)

Mailing Address JULIS VILLAGE

City BY A State WA Zip Code 24980

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **335.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI06330**

Amount of Each Receipt this Period  
**25.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **75.00**

**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 2215 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. RICK TARIF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address JULIS VILLAGE  
 City BY A State WA Zip Code 24980  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **335.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2014**  
**Transaction ID : 2014M04L11AI06331**  
 Amount of Each Receipt this Period  
**50.00**

**B. RICK TARIF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address JULIS VILLAGE  
 City BY A State WA Zip Code 24980  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **335.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI06332**  
 Amount of Each Receipt this Period  
**10.00**

**C. RICK TARIF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address JULIS VILLAGE  
 City BY A State WA Zip Code 24980  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **335.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI06333**  
 Amount of Each Receipt this Period  
**10.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>70.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2216 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. RICK TARIF**  
Full Name (Last, First, Middle Initial)

Mailing Address JULIS VILLAGE

City BY A State WA Zip Code 24980

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **335.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI06334**

Amount of Each Receipt this Period  
**5.00**

**B. RICK TARIF**  
Full Name (Last, First, Middle Initial)

Mailing Address JULIS VILLAGE

City BY A State WA Zip Code 24980

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **335.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI06335**

Amount of Each Receipt this Period  
**25.00**

**C. MR. DAVID TARPO**  
Full Name (Last, First, Middle Initial)

Mailing Address 1622 CHERRY BLOSSOM DRIVE

City MUNSTER State IN Zip Code 46321-5143

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN CHEMICAL SERVICE, INC. Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 04 / 2014**  
**Transaction ID : 2014M04L11AI06336**

Amount of Each Receipt this Period  
**500.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>530.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2217 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CAROLYN TARR**  
Full Name (Last, First, Middle Initial)

Mailing Address 17108 W. CALISTOGA DRIVE

City SURPRISE State AZ Zip Code 85387-7549

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06337**

Amount of Each Receipt this Period  
 25.00

**B. MRS. CAROLYN TARR**  
Full Name (Last, First, Middle Initial)

Mailing Address 17108 W. CALISTOGA DRIVE

City SURPRISE State AZ Zip Code 85387-7549

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06338**

Amount of Each Receipt this Period  
 20.00

**C. MR. STANLEY G. TATE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1175 N.E. 125TH STREET  
SUITE 102

City NORTH MIAMI State FL Zip Code 33161-5009

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF - EMPLOYED Occupation DEVELOPER & CONTRACTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06339**

Amount of Each Receipt this Period  
 32400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 32445.00

**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 2218 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. JOHN D. TAULBEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2434 MOUNT VERNON DRIVE  
 City State Zip Code  
 FAIRFIELD OH 45014-3906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06340**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. WILLIAM TAUNTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 40124 227TH STREET  
 City State Zip Code  
 WOONSOCKET SD 57385-6819  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06341**  
 Amount of Each Receipt this Period  
 1.00

**C. MRS. BETTY TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1701 3RD AVENUE SE  
 APARTMENT 109  
 City State Zip Code  
 ABERDEEN SD 57401-4811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 341.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06342**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	102.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2219 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. BETTY TAYLOR</b>		Date of Receipt
Mailing Address 1701 3RD AVENUE SE APARTMENT 109		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2014"/>
City	State	Zip Code
ABERDEEN	SD	57401-4811
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI06343</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="121.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="341.00"/>	

Full Name (Last, First, Middle Initial) <b>B. CHRIS TAYLOR</b>		Date of Receipt
Mailing Address 3413 FOX TAIL TRL NW		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
PRIOR LAKE	MN	55372-1689
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI06344</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
H&H PARTNERS	PRESIDENT & CEO	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="310.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MRS. ELIZABETH ANNE TAYLOR</b>		Date of Receipt
Mailing Address 100 N. COLLEGE ROW APARTMENT 156		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
BREVARD	NC	28712-4876
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI06345</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="350.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="321.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 2220 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ELIZABETH ANNE TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 N. COLLEGE ROW  
 APARTMENT 156  
 City BREVARD State NC Zip Code 28712-4876  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06346**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. ELIZABETH ANNE TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 N. COLLEGE ROW  
 APARTMENT 156  
 City BREVARD State NC Zip Code 28712-4876  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06347**  
 Amount of Each Receipt this Period  
 150.00

**C. MR. FRANK W. TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 842 E. VILLA STREET  
 APARTMENT 551  
 City PASADENA State CA Zip Code 91101-1223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06348**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2221 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. FRANK W. TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 842 E. VILLA STREET  
 APARTMENT 551  
 City PASADENA State CA Zip Code 91101-1223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06349**  
 Amount of Each Receipt this Period  
 51.00

**B. DR. GLEN L. TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 732 HILLCREST STREET  
 City DENTON State TX Zip Code 76201-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06350**  
 Amount of Each Receipt this Period  
 30.00

**C. DR. GLEN L. TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 732 HILLCREST STREET  
 City DENTON State TX Zip Code 76201-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06351**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 106.00  
**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 2222 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. GLEN L. TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 732 HILLCREST STREET  
 City DENTON State TX Zip Code 76201-2405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06352**  
 Amount of Each Receipt this Period  
 21.00

**B. MR. HAMILTON TAYLOR III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 142  
 City RUTHERFORD State TN Zip Code 38369-0142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06353**  
 Amount of Each Receipt this Period  
 35.00

**C. MR. HAMILTON TAYLOR III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 142  
 City RUTHERFORD State TN Zip Code 38369-0142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06354**  
 Amount of Each Receipt this Period  
 75.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	131.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2223 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENNETH TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 695 TAYLOR AVENUE  
 City WYALUSING State PA Zip Code 18853-8361  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06355**  
 Amount of Each Receipt this Period  
 750.00

**B. MRS. LEAH K. TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 WOODSTONE STREET  
 City HOUSTON State TX Zip Code 77024-6228  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06356**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. MARGARET A. TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2418 ROGUE VALLEY MANOR DRIVE  
 City MEDFORD State OR Zip Code 97504-4513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06357**  
 Amount of Each Receipt this Period  
 51.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 901.00  
**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 2224 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. NORMAN V. TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 924 LAUDERDALE DRIVE  
 City LEXINGTON State KY Zip Code 40515-6466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06358**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. NORMAN V. TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 924 LAUDERDALE DRIVE  
 City LEXINGTON State KY Zip Code 40515-6466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06359**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. NORMAN V. TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 924 LAUDERDALE DRIVE  
 City LEXINGTON State KY Zip Code 40515-6466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06360**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	241.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2225 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. R. KENNON TAYLOR JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3916 FARM GATE AVENUE  
 City DURHAM State NC Zip Code 27705-2448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06361**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. STEVEN TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3905 LEICESTER S.  
 City WILLIAMSBURG State VA Zip Code 23188-6635  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WILLIAMSBURG PLANTATION Occupation SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 641.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06362**  
 Amount of Each Receipt this Period  
 101.00

**C. THOMAS TAYLOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address AOMC, 600 ROE AVENUE  
 City ELMIRA State NY Zip Code 14905-1629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ARFL Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06363**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 471.00  
**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 2226 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES R. TEAL**  
Full Name (Last, First, Middle Initial)

Mailing Address 95 MAYFAIR DRIVE

City State Zip Code  
BELLA VISTA AR 72715-5390

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06364**

Amount of Each Receipt this Period  
200.00

**B. MR. BILL TEAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2364 OAKRIDGE PLACE

City State Zip Code  
ESCONDIDO CA 92026-1224

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06365**

Amount of Each Receipt this Period  
200.00

**C. REV. KRISTIAN CAELUM TEATER**  
Full Name (Last, First, Middle Initial)

Mailing Address 5200 GLENNON DRIVE

City State Zip Code  
SAINT LOUIS MO 63119-4330

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
ARCHDIOCESE OF SAINT LOUIS CATHOLIC PRIEST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
865.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06366**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00

**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 2227 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES M. TEDESCO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 369 S.E. ANASTASIA STREET  
 City LAKE CITY State FL Zip Code 32025-1733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06367**  
 Amount of Each Receipt this Period  
 215.00

**B. MRS. REBECCA TEETER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 901 N. MCCALL STREET  
 City ULYSSES State KS Zip Code 67880-1643  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06368**  
 Amount of Each Receipt this Period  
 201.00

**C. MS. LINDA TEETZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1280 OLDE DOUBLOON DRIVE  
 City VERO BEACH State FL Zip Code 32963-2453  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06369**  
 Amount of Each Receipt this Period  
 125.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	541.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2228 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. BRANDT TEMPLE</b>		Date of Receipt										
Mailing Address 4626 ST. CHARLES AVENUE		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>12</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		12		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03		12		2014								
City State Zip Code NEW ORLEANS LA 70115-4834		<b>Transaction ID : 2014M04L11AI06370</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer Occupation SELF-EMPLOYED OWNER		<table border="1"><tr><td>100.00</td></tr></table>	100.00									
100.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"><tr><td>250.00</td></tr></table>	250.00										
250.00												

Full Name (Last, First, Middle Initial) <b>B. BRANDT TEMPLE</b>		Date of Receipt										
Mailing Address 4626 ST. CHARLES AVENUE		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		19		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03		19		2014								
City State Zip Code NEW ORLEANS LA 70115-4834		<b>Transaction ID : 2014M04L11AI06371</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer Occupation SELF-EMPLOYED OWNER		<table border="1"><tr><td>100.00</td></tr></table>	100.00									
100.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"><tr><td>250.00</td></tr></table>	250.00										
250.00												

Full Name (Last, First, Middle Initial) <b>C. BRANDT TEMPLE</b>		Date of Receipt										
Mailing Address 4626 ST. CHARLES AVENUE		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>25</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		25		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03		25		2014								
City State Zip Code NEW ORLEANS LA 70115-4834		<b>Transaction ID : 2014M04L11AI06372</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer Occupation SELF-EMPLOYED OWNER		<table border="1"><tr><td>50.00</td></tr></table>	50.00									
50.00												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	<table border="1"><tr><td>250.00</td></tr></table>	250.00										
250.00												

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<table border="1"><tr><td>250.00</td></tr></table>	250.00
250.00		
<b>TOTAL</b> This Period (last page this line number only).....▶	<table border="1"><tr><td></td></tr></table>	

**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 2229 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ARCH TEMPLETON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 147 COTTONWOOD CREEK LANE  
 City AIKEN State SC Zip Code 29803-2750  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06373**  
 Amount of Each Receipt this Period  
 195.00

**B. MR. GAYLE R. TEMPLETON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 149  
 City LOUISVILLE State MS Zip Code 39339-0149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06374**  
 Amount of Each Receipt this Period  
 175.00

**C. MR. GAYLE R. TEMPLETON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 149  
 City LOUISVILLE State MS Zip Code 39339-0149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06375**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	371.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2230 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT C. TENGDIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5241 LOCHLOY DRIVE  
 City EDINA State MN Zip Code 55436-2023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ALLISON-WILLIAMS COMPANY Occupation INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06376**  
 Amount of Each Receipt this Period 100.00

**B. MR. DARWIN D. TENNANT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 945  
 City DELAND State FL Zip Code 32721-0945  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06377**  
 Amount of Each Receipt this Period 35.00

**C. MR. DARWIN D. TENNANT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 945  
 City DELAND State FL Zip Code 32721-0945  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06378**  
 Amount of Each Receipt this Period 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 155.00  
**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 2231 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DARWIN D. TENNANT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 945  
 City DELAND State FL Zip Code 32721-0945  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06379**  
 Amount of Each Receipt this Period  
 21.00

**B. MR. IGOR TEPLITSKY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7367 SARIMENTO PLACE  
 City DELRAY BEACH State FL Zip Code 33446-4415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06380**  
 Amount of Each Receipt this Period  
 25000.00

**C. MRS. LILLIAN TEPLITSKY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7367 SARIMENTO PLACE  
 City DELRAY BEACH State FL Zip Code 33446-4415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06381**  
 Amount of Each Receipt this Period  
 25000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50021.00  
**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 2232 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BARBARA TERRELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 2108  
 City State Zip Code  
 ROCKPORT TX 78381-2108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06382**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. STEPHEN G. TERRELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 28150 N. ALMA SCHOOL PARKWAY  
 City State Zip Code  
 SCOTTSDALE AZ 85262-8048  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED STEEL CONTRACTOR  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06383**  
 Amount of Each Receipt this Period  
 120.00

**C. MRS. L. JOY TERRILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1220 W. CAMINO URBANO  
 City State Zip Code  
 GREEN VALLEY AZ 85622-4804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06384**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 490.00  
**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 2233 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. LEE H. TERRILL**

Mailing Address 2138 VILLA WAY

City State Zip Code  
NEW SMYRNA BEACH FL 32169-2069

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
660.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06385**

Amount of Each Receipt this Period  
660.00

Full Name (Last, First, Middle Initial)  
**B. MR. STEPHEN C. TERRIO**

Mailing Address 55 N KENNETH CT

City State Zip Code  
MERRITT ISLAND FL 32952-2602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06386**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**C. MR. WILLIAM TERRIS**

Mailing Address 4800 HIGHWAY A1A  
APARTMENT 201

City State Zip Code  
VERO BEACH FL 32963-1219

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06387**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 980.00

**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 2234 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM TERRIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4800 HIGHWAY A1A  
 APARTMENT 201  
 City VERO BEACH State FL Zip Code 32963-1219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06388**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. LANNY R. TERRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1623 MOSSY STONE DRIVE  
 City FRIENDSWOOD State TX Zip Code 77546-5577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06389**  
 Amount of Each Receipt this Period  
 75.00

**C. MR. MARK TERRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11515 SUMMERHILL LN  
 City HOUSTON State TX Zip Code 77024-5218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EXXONMOBIL Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06390**  
 Amount of Each Receipt this Period  
 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2235 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. EDWIN TERUYA</b>		Date of Receipt
Mailing Address 3815 LYCEUM AVENUE		M M M / D D D / Y Y Y Y Y Y 03 / 12 / 2014
City	State	Zip Code
LOS ANGELES	CA	90066-4167
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI06391</b>
Name of Employer REQUESTED		Amount of Each Receipt this Period
Occupation REQUESTED		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	220.00	

Full Name (Last, First, Middle Initial) <b>B. MR. EDWIN TERUYA</b>		Date of Receipt
Mailing Address 3815 LYCEUM AVENUE		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2014
City	State	Zip Code
LOS ANGELES	CA	90066-4167
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI06392</b>
Name of Employer REQUESTED		Amount of Each Receipt this Period
Occupation REQUESTED		120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	220.00	

Full Name (Last, First, Middle Initial) <b>C. MS. VERNA DUNSTAN TEST</b>		Date of Receipt
Mailing Address 200 GLENWOOD CIRCLE APARTMENT C3		M M M / D D D / Y Y Y Y Y Y 03 / 11 / 2014
City	State	Zip Code
MONTEREY	CA	93940-6756
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI06393</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	270.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2236 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. VERNA DUNSTAN TEST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 GLENWOOD CIRCLE  
 APARTMENT C3  
 City MONTEREY State CA Zip Code 93940-6756  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **201.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06394**  
 Amount of Each Receipt this Period  
**101.00**

**B. MR. HARRY A. TESTANI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 104 BASSICK ROAD  
 City TRUMBULL State CT Zip Code 06611-2910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SIKORSKY AIRCRAFT Occupation E.A.P. CONSULTANT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **201.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06395**  
 Amount of Each Receipt this Period  
**61.00**

**C. MR. ANTHONY TETHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6400 LYRIC LANE  
 City FALLS CHURCH State VA Zip Code 22044-1219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2100.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06396**  
 Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1162.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2237 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ANH N. THACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 390 CANYON DRIVE S.  
 City COLUMBUS State OH Zip Code 43214-3100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S.P.S. Occupation MAIL CARRIER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06397**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. JEFFREY THACKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4000 PRESIDENTIAL BLVD.  
 APARTMENT 904  
 City PHILADELPHIA State PA Zip Code 19131-1720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06398**  
 Amount of Each Receipt this Period  
 101.00

**C. JAMES THARP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9577 S.E SHARON ST  
 City HOBE SOUND State FL Zip Code 33455-6853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF EMPLOYED Occupation CARPENTER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06399**  
 Amount of Each Receipt this Period  
 265.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	616.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2238 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CARL VIRGIL THATCHER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 406 N. SYCAMORE STREET  
 City CRESTON State IA Zip Code 50801-2248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06400**  
 Amount of Each Receipt this Period  
 60.00

**B. MR. CARL VIRGIL THATCHER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 406 N. SYCAMORE STREET  
 City CRESTON State IA Zip Code 50801-2248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06401**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. RICHARD E. THATCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 425 S. FANNING AVENUE  
 City IDAHO FALLS State ID Zip Code 83401-4013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06402**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 111.00  
**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 2239 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD THATCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4114 W. MORRISON AVENUE  
 City TAMPA State FL Zip Code 33629-4300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RAYMOND JAMES FINANCIAL SERVICES Occupation FINANCIAL ADVISOR/BRANCH MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06403**  
 Amount of Each Receipt this Period 1100.00

**B. MR. HAROLD THIBODEAUX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7485 PHELAN BLVD.  
 City BEAUMONT State TX Zip Code 77706-5748  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF - EMPLOYED Occupation PETROLEUM LANDMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06404**  
 Amount of Each Receipt this Period 250.00

**C. MR. MALCOLM H. THIELE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1604 FRAFORD COURT  
 City VIRGINIA BEACH State VA Zip Code 23455-4418  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06405**  
 Amount of Each Receipt this Period 330.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1680.00  
**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 2240 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MISS LOIS D. THIES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2207 MCKENNA BLVD.  
 City MADISON State WI Zip Code 53711-3911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06406**  
 Amount of Each Receipt this Period  
 50.00

**B. MISS LOIS D. THIES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2207 MCKENNA BLVD.  
 City MADISON State WI Zip Code 53711-3911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06407**  
 Amount of Each Receipt this Period  
 21.00

**C. MR. KENNETH M. THOLAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3043 PUTTING GREEN WAY  
 City LOUISA State VA Zip Code 23093-2247  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06408**  
 Amount of Each Receipt this Period  
 135.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 206.00  
**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 2241 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENNETH M. THOLAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3043 PUTTING GREEN WAY  
 City LOUISA State VA Zip Code 23093-2247  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06409**  
 Amount of Each Receipt this Period  
 250.00

**B. LT. COL. ALAN B. THOMAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1798 W. PLACITA DE O'CAMPO  
 City TUCSON State AZ Zip Code 85704-1079  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 377.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06410**  
 Amount of Each Receipt this Period  
 125.00

**C. LT. COL. ALAN B. THOMAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1798 W. PLACITA DE O'CAMPO  
 City TUCSON State AZ Zip Code 85704-1079  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 377.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06411**  
 Amount of Each Receipt this Period  
 102.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 477.00  
**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 2242 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BARBARA THOMAS**  
Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 876294

City WASILLA State AK Zip Code 99687-6294

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2014**

**Transaction ID : 2014M04L11AI06412**

Amount of Each Receipt this Period  
**100.00**

**B. MRS. BEULAH THOMAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1735 QUARTZ LANE

City LAKE HAVASU CITY State AZ Zip Code 86403-5623

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **265.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2014**

**Transaction ID : 2014M04L11AI06413**

Amount of Each Receipt this Period  
**50.00**

**C. MR. RICHARD S. THOMAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 18650 GLENEAGLES DRIVE

City BATON ROUGE State LA Zip Code 70810-5971

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **511.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 12 / 2014**

**Transaction ID : 2014M04L11AI06414**

Amount of Each Receipt this Period  
**120.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **270.00**

**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 2243 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD S. THOMAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 18650 GLENEAGLES DRIVE

City State Zip Code  
BATON ROUGE LA 70810-5971

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
511.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06415**

Amount of Each Receipt this Period  
60.00

**B. MR. RICHARD S. THOMAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 18650 GLENEAGLES DRIVE

City State Zip Code  
BATON ROUGE LA 70810-5971

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
511.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06416**

Amount of Each Receipt this Period  
121.00

**C. MRS. SALLY THOMAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 515 S. FLOWER STREET  
FLOOR 6

City State Zip Code  
LOS ANGELES CA 90071-2201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06417**

Amount of Each Receipt this Period  
32000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 32181.00

**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 2244 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TELFORD W. THOMAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2703 MONOCACY FORD ROAD

City FREDERICK State MD Zip Code 21701-6810

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06418**

Amount of Each Receipt this Period  
 101.00

**B. MR. THOMAS P. THOMAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 466 W. BRECKENRIDGE STREET

City FERNDALE State MI Zip Code 48220-1726

FEC ID number of contributing federal political committee. **C**

Name of Employer DELPHI AUTOMOTIVE SYSTEMS Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06419**

Amount of Each Receipt this Period  
 100.00

**C. MR. WILLIAM FRANCIS THOMAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 34 OLD FREDERICKSBURG ROAD

City BOERNE State TX Zip Code 78015-8314

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06420**

Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 451.00

**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 2245 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT J. THOMASSIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 399  
 City BOURG State LA Zip Code 70343-0399  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06421**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. ARNOLD W. THOMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 890 E. HARRISON AVENUE APARTMENT 24  
 City POMONA State CA Zip Code 91767-2003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06422**  
 Amount of Each Receipt this Period  
 2.00

**C. MR. DONALD THOMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 820 N. SAVAGE CREEK LANE  
 City WEATHERFORD State TX Zip Code 76087-4062  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LOCKHEED MARTIN Occupation ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06423**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 372.00  
**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 2246 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DOUGLAS G. THOMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1529  
 City UPLAND State CA Zip Code 91785-1529  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06424**  
 Amount of Each Receipt this Period  
 55.00

**B. MR. DOUGLAS G. THOMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1529  
 City UPLAND State CA Zip Code 91785-1529  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06425**  
 Amount of Each Receipt this Period  
 60.00

**C. MR. ERIC THOMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 S ROYAL PALM WAY STE 211  
 City TAMPA State FL Zip Code 33609-3717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE FOUNTAIN GROUP Occupation PRINCIPAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06426**  
 Amount of Each Receipt this Period  
 400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	515.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2247 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GARY J. THOMPSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 19874 FESTIVAL LOOP

City PRINCETON State MO Zip Code 64673-9827

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06427**

Amount of Each Receipt this Period  
 500.00

**B. MR. HALL W. THOMPSON JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 1315 GREYSTONE CREST

City BIRMINGHAM State AL Zip Code 35242-7009

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06428**

Amount of Each Receipt this Period  
 300.00

**C. MR. HALL W. THOMPSON JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 1315 GREYSTONE CREST

City BIRMINGHAM State AL Zip Code 35242-7009

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06429**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00

**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 2248 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HALL W. THOMPSON JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1315 GREYSTONE CREST  
 City BIRMINGHAM State AL Zip Code 35242-7009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06430**  
 Amount of Each Receipt this Period 250.00

**B. MR. HARRY THOMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2947 S. BRIDGE ROAD  
 City WASHINGTON State PA Zip Code 15301-8554  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06431**  
 Amount of Each Receipt this Period 160.00

**C. COL. KENNETH L. THOMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7574 MORRISON COURT  
 City FORT WORTH State TX Zip Code 76112-4419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06432**  
 Amount of Each Receipt this Period 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	435.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2249 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LUCY R. THOMPSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 7 GLENEAGLES DRIVE

City SHOAL CREEK State AL Zip Code 35242-5913

FEC ID number of contributing federal political committee. **C**

Name of Employer UNEMPLOYED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06433**

Amount of Each Receipt this Period  
 101.00

**B. MR. RICHARD DOUGLAS THOMPSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 8501 E. VISTA DRIVE

City SCOTTSDALE State AZ Zip Code 85250-7442

FEC ID number of contributing federal political committee. **C**

Name of Employer GENERAL DYNAMICS Occupation TEST ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06434**

Amount of Each Receipt this Period  
 100.00

**C. MR. RICK THOMPSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 27 FALLS TERRACE

City FAIR OAKS RANCH State TX Zip Code 78015-4482

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06435**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 701.00

**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 2250 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD E. THOMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8129 CURRY AVE NE  
 City ALBUQUERQUE State NM Zip Code 87109-4913  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer USAF Occupation EQUIPMENT SPECIALIST  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 26 / 2014**  
**Transaction ID : 2014M04L11AI06436**  
 Amount of Each Receipt this Period **50.00**

**B. MR. CLIFFORD L. THOMSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11700 PRESTON ROAD SUITE 660  
 City DALLAS State TX Zip Code 75230-2739  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2000.00**

Date of Receipt **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI06437**  
 Amount of Each Receipt this Period **2000.00**

**C. LT. GEN. HERMAN O. THOMSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5100 JOHN D. RYAN BLVD. APARTMENT 715  
 City SAN ANTONIO State TX Zip Code 78245-3548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **210.00**

Date of Receipt **03 / 04 / 2014**  
**Transaction ID : 2014M04L11AI06438**  
 Amount of Each Receipt this Period **100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2150.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2251 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN H. THOMSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 824 CRESCENT DRIVE  
 P.O. BOX 57  
 City CRESCO State IA Zip Code 52136-1044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06439**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. JOHN H. THOMSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 824 CRESCENT DRIVE  
 P.O. BOX 57  
 City CRESCO State IA Zip Code 52136-1044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06440**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JOHN H. THOMSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 824 CRESCENT DRIVE  
 P.O. BOX 57  
 City CRESCO State IA Zip Code 52136-1044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06441**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 301.00  
**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 2252 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. NORMA B. THORNBROUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13208 HIDDEN VALLEY ROAD N.E.  
 City ALBUQUERQUE State NM Zip Code 87111-4212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06442**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. THOMAS RAY THORNBURY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 577 PERUGIA WAY  
 City LOS ANGELES State CA Zip Code 90077-3708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06443**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. THOMAS RAY THORNBURY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 577 PERUGIA WAY  
 City LOS ANGELES State CA Zip Code 90077-3708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06444**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 241.00  
**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 2253 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SALLY S. THORPE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12805C MINK FARM ROAD  
 City THURMONT State MD Zip Code 21788-1402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **751.00**

Date of Receipt: **03 / 04 / 2014**  
**Transaction ID : 2014M04L11AI06445**  
 Amount of Each Receipt this Period: **500.00**

**B. MS. SALLY S. THORPE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12805C MINK FARM ROAD  
 City THURMONT State MD Zip Code 21788-1402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **751.00**

Date of Receipt: **03 / 26 / 2014**  
**Transaction ID : 2014M04L11AI06446**  
 Amount of Each Receipt this Period: **251.00**

**C. MR. BILLY J. THRASH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1092  
 City EUNICE State NM Zip Code 88231-1092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **N.M.R.** Occupation: **VICE PRESIDENT**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt: **03 / 24 / 2014**  
**Transaction ID : 2014M04L11AI06447**  
 Amount of Each Receipt this Period: **50.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>801.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2254 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. STEPHEN T. THREADGILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1304 GARDENIA COVE  
 City OXFORD State MS Zip Code 38655-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06448**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. LEIGH THRELKELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 516  
 City REIDSVILLE State GA Zip Code 30453-0516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06449**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. DAVID C. THURGOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 495 E. 400 N.  
 City LINDON State UT Zip Code 84042-1506  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06450**  
 Amount of Each Receipt this Period  
 265.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 635.00  
**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 2255 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. JOHN T. TIANO**

Mailing Address 2349 BOTULPH ROAD

City State Zip Code  
SANTA FE NM 87505-5704

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06451**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. DR. RICHARD A. TIBBALS**

Mailing Address 5535 AUTUMN RIDGE DRIVE

City State Zip Code  
NEWBURGH IN 47630-3286

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MIDWEST E.N.T. PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
601.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06452**

Amount of Each Receipt this Period  
200.00

Full Name (Last, First, Middle Initial)  
**C. DR. RICHARD A. TIBBALS**

Mailing Address 5535 AUTUMN RIDGE DRIVE

City State Zip Code  
NEWBURGH IN 47630-3286

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MIDWEST E.N.T. PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
601.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06453**

Amount of Each Receipt this Period  
201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 651.00

**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 2256 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD TIETZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8301 CREEKSIDE CIRCLE  
 APARTMENT 360  
 City MINNEAPOLIS State MN Zip Code 55437-3869  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06454**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. LAWRENCE W. TIGHE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 259 OLD LOUASLER ROAD  
 City SUDBURY State MA Zip Code 01776  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06455**  
 Amount of Each Receipt this Period  
 120.00

**C. DR. JORGE E. TIJMES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7417 NORTH 4TH STREET  
 City MC ALLEN State TX Zip Code 78504-1843  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer M.D. Occupation M.D.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06456**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	490.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2257 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JEFFEY TIKKANEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 215 FOREST AVENUE  
 City OAK PARK State IL Zip Code 60302-1907  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HEALTH CARE SERVICE CORPORATION Occupation MARKETING EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06457**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. ALAN L. TILMANS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 429 MATTY DRIVE  
 City BELLE VERNON State PA Zip Code 15012-3710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06458**  
 Amount of Each Receipt this Period  
 110.00

**C. DR. LLOYD TIMBERLAKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 217 THE PRADO NE  
 City ATLANTA State GA Zip Code 30309-3335  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06459**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 710.00  
**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 2258 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EARL TINDALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 723 CHAPMAN LOOP  
 City THE VILLAGES State FL Zip Code 32162-4507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06460**  
 Amount of Each Receipt this Period  
**120.00**

**B. MR. WILLIAM W. TINKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4821 CHAFFEY LANE  
 City LEXINGTON State KY Zip Code 40515-1166  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06461**  
 Amount of Each Receipt this Period  
**110.00**

**C. MR. FRANK E. TIPPETS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 EXECUTIVE PARKWAY APARTMENT 102  
 City OROVILLE State CA Zip Code 95966-6126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06462**  
 Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... **280.00**  
**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 2259 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HENRY B. TIPPIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7009 EDGEFIELD DRIVE  
 City AUSTIN State TX Zip Code 78731-2925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CLERICAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06463**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. HENRY B. TIPPIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7009 EDGEFIELD DRIVE  
 City AUSTIN State TX Zip Code 78731-2925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CLERICAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06464**  
 Amount of Each Receipt this Period  
 56.00

**C. MR. C. BRADLEY TIPS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6020 ARBOR LANE  
 APARTMENT 101  
 City NORTHFIELD State IL Zip Code 60093-3366  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 391.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06465**  
 Amount of Each Receipt this Period  
 130.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	286.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2260 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. C. BRADLEY TIPS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6020 ARBOR LANE  
 APARTMENT 101  
 City NORTHFIELD State IL Zip Code 60093-3366  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 391.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06466**  
 Amount of Each Receipt this Period  
 131.00

**B. MR. WALLY R. TIPSWORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 2976  
 City TULSA State OK Zip Code 74101-2976  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MANUFACTURER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06467**  
 Amount of Each Receipt this Period  
 650.00

**C. MS. CONNIE W. TIRSCHWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 63 DARTMOUTH DRIVE  
 City RANCHO MIRAGE State CA Zip Code 92270-3164  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1101.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06468**  
 Amount of Each Receipt this Period  
 501.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1282.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2261 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ROBERTA TITELMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 BEACHVIEW DRIVE PH S.  
 City VERO BEACH State FL Zip Code 32963-3670  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06469**  
 Amount of Each Receipt this Period 500.00

**B. MRS. ROBERTA TITELMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 200 BEACHVIEW DRIVE PH S.  
 City VERO BEACH State FL Zip Code 32963-3670  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06470**  
 Amount of Each Receipt this Period 500.00

**C. MR. JOSEPH TOCCO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 53280 HILLSIDE DRIVE  
 City SHELBY TOWNSHIP State MI Zip Code 48316-2734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06471**  
 Amount of Each Receipt this Period 80.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1080.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2262 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOSEPH TOCCO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 53280 HILLSIDE DRIVE  
 City State Zip Code  
 SHELBY TOWNSHIP MI 48316-2734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06472**  
 Amount of Each Receipt this Period  
 80.00

**B. MRS. JOYCE L. TOIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16206 GLENHOLLOW COURT  
 City State Zip Code  
 CULPEPER VA 22701-9722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06473**  
 Amount of Each Receipt this Period  
 35.00

**C. MRS. JOYCE L. TOIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16206 GLENHOLLOW COURT  
 City State Zip Code  
 CULPEPER VA 22701-9722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06474**  
 Amount of Each Receipt this Period  
 35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2263 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JOYCE L. TOIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16206 GLENHOLLOW COURT  
 City State Zip Code  
 CULPEPER VA 22701-9722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06475**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. JOHN TOLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 211 E. JONES STREET  
 City State Zip Code  
 SAVANNAH GA 31401-4703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 337.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06476**  
 Amount of Each Receipt this Period  
 107.00

**C. DR. GILES D. TOLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1037 COTTONWOOD CIRCLE  
 City State Zip Code  
 GOLDEN CO 80401-1794  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06477**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	477.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2264 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SUZANNE TOLMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 2709 MERRIHILLS DRIVE S.W.

City ROCHESTER	State MN	Zip Code 55902-1168
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
415.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2014

**Transaction ID : 2014M04L11AI06478**

Amount of Each Receipt this Period  
250.00

**B. MR. JOHN G. TOLOMEI**  
Full Name (Last, First, Middle Initial)

Mailing Address 190 N. OLD RAND ROAD

City LAKE ZURICH	State IL	Zip Code 60047-2220
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer COSKATA INC.	Occupation ATTORNEY
----------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2014

**Transaction ID : 2014M04L11AI06479**

Amount of Each Receipt this Period  
250.00

**C. MR. DAVID W. TOMPKINS**  
Full Name (Last, First, Middle Initial)

Mailing Address 501 POWELL LANE

City FLATWOODS	State KY	Zip Code 41139-1743
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2014

**Transaction ID : 2014M04L11AI06480**

Amount of Each Receipt this Period  
60.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	560.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2265 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID W. TOMPKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 POWELL LANE  
 City FLATWOODS State KY Zip Code 41139-1743  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06481**  
 Amount of Each Receipt this Period  
 75.00

**B. MRS. DOROTHY TOMPKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 304 LONGWOODS LANE  
 City HOUSTON State TX Zip Code 77024-5615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06482**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. ROBERT J. TOMSICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 151 VIA BELLARIA  
 City PALM BEACH State FL Zip Code 33480-4912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NESCO, INC. Occupation CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06483**  
 Amount of Each Receipt this Period  
 15000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2266 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID TONEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 112 OAKHURST AVENUE  
 City BLUEFIELD State WV Zip Code 24701-4131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WATTS TRANSFORMERS Occupation BUSINESS DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06484**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. JAMES D. TONEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23039 N. PADARO COURT  
 City SUN CITY WEST State AZ Zip Code 85375-1627  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06485**  
 Amount of Each Receipt this Period  
 225.00

**C. MR. BRIAN K. TOOLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 111 LAKESHORE DR  
 City BARDSTOWN State KY Zip Code 40004-9163  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06486**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	975.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2267 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ANTHONY TOPAZI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7341 KINGS MTN ROAD  
 City VESTAVIA State AL Zip Code 35242-2596  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06487**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. ANTHONY TOPAZI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7341 KINGS MTN ROAD  
 City VESTAVIA State AL Zip Code 35242-2596  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06488**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. ANTHONY TOPAZI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7341 KINGS MTN ROAD  
 City VESTAVIA State AL Zip Code 35242-2596  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06489**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2268 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. JUDY B. TOPPING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 633 STONEWATER BLVD.  
 City FRANKLIN State TN Zip Code 37064-4890  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06490**  
 Amount of Each Receipt this Period  
 200.00

**B. MS. JUDY B. TOPPING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 633 STONEWATER BLVD.  
 City FRANKLIN State TN Zip Code 37064-4890  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 271.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06491**  
 Amount of Each Receipt this Period  
 71.00

**C. MR. CARL A. TORBERT JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1009  
 City POINT CLEAR State AL Zip Code 36564-1009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06492**  
 Amount of Each Receipt this Period  
 251.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	522.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2269 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. DOROTHY COLLINS TORBERT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8523 THACKERY STREET  
 APARTMENT 9303  
 City DALLAS State TX Zip Code 75225-3964  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06493**  
 Amount of Each Receipt this Period  
 500.00

**B. MRS. LEE F.J. TORRIES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11816 PINTAIL COURT  
 City NAPLES State FL Zip Code 34119-8899  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06494**  
 Amount of Each Receipt this Period  
 500.00

**C. JIMMY TOSH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1570 ATLANTIC AVE  
 City HENRY State TN Zip Code 38231-3551  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06495**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1100.00  
**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 2270 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE C. TOSTEVIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 12555 37TH AVENUE N.E.

City SEATTLE	State WA	Zip Code 98125-4654
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2014

**Transaction ID : 2014M04L11AI06496**

Amount of Each Receipt this Period  
120.00

**B. MR. GEORGE C. TOSTEVIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 12555 37TH AVENUE N.E.

City SEATTLE	State WA	Zip Code 98125-4654
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2014

**Transaction ID : 2014M04L11AI06497**

Amount of Each Receipt this Period  
60.00

**C. MS. ALMA E. TOTUSEK**  
Full Name (Last, First, Middle Initial)

Mailing Address 2125 ELM STREET

City FREMONT	State NE	Zip Code 68025-2642
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
571.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI06498**

Amount of Each Receipt this Period  
151.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	331.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2271 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ALMA E. TOTUSEK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2125 ELM STREET  
 City State Zip Code  
 FREMONT NE 68025-2642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 571.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06499**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. GERALD L. TOWER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 700  
 City State Zip Code  
 SAN MATEO FL 32187-0700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED SAFETY ENGINEERING & WELDER  
 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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06500**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JAMES E. TOWNES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 308 E. 2ND STREET  
 City State Zip Code  
 MOORESTOWN NJ 08057-2902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 361.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06501**  
 Amount of Each Receipt this Period  
 121.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	321.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2272 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LEONA M. TOWNSEND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 34300 LANTERN BAY DRIVE  
 UNIT 21  
 City DANA POINT State CA Zip Code 92629-2857  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06502**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. MICHAEL W. TOWSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 BISHOPWOOD COURT  
 City SAVANNAH State GA Zip Code 31411-2862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06503**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. MICHAEL W. TOWSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 BISHOPWOOD COURT  
 City SAVANNAH State GA Zip Code 31411-2862  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 455.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06504**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	245.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2273 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. C. DAVID TRADER</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 04 / 2014 <b>Transaction ID : 2014M04L11AI06505</b>
Mailing Address 160 MUNGER HILL ROAD		Amount of Each Receipt this Period 100.00
City WESTFIELD State MA Zip Code 01085-4500	FEC ID number of contributing federal political committee. C	
Name of Employer RETIRED Occupation RETIRED	Aggregate Year-to-Date 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. C. DAVID TRADER</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014 <b>Transaction ID : 2014M04L11AI06506</b>
Mailing Address 160 MUNGER HILL ROAD		Amount of Each Receipt this Period 50.00
City WESTFIELD State MA Zip Code 01085-4500	FEC ID number of contributing federal political committee. C	
Name of Employer RETIRED Occupation RETIRED	Aggregate Year-to-Date 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MS. MARY J. TRAINER</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014 <b>Transaction ID : 2014M04L11AI06507</b>
Mailing Address 407 PIN OAK DRIVE		Amount of Each Receipt this Period 111.00
City WHITE HAVEN State PA Zip Code 18661-4107	FEC ID number of contributing federal political committee. C	
Name of Employer RETIRED Occupation RETIRED	Aggregate Year-to-Date 221.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	261.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2274 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ANN GORDON TRAMMELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4605 POST OAK PLACE DRIVE  
 SUITE 270  
 City HOUSTON State TX Zip Code 77027-9745  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06508**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. DANG TRAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3723 OAK HILL AVENUE  
 City LOS ANGELES State CA Zip Code 90032-1444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CALIFORNIA STATE UNIVERSITY Occupation PROFESSOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06509**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. DANG TRAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3723 OAK HILL AVENUE  
 City LOS ANGELES State CA Zip Code 90032-1444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CALIFORNIA STATE UNIVERSITY Occupation PROFESSOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06510**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2275 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. TIMOTHY TRAUTMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2735 LUNDY LANE  
 City HUNTINGDON VALLEY State PA Zip Code 19006-5007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TRAUTMANN INC. Occupation STATISTICS/FINANCE  
 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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06511**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. FORREST TRAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2379 S. POINTE VEDRA BLVD.  
 City PONTE VEDRA BEACH State FL Zip Code 32082-4519  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06512**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. THOMAS M. TRAYNOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9263 RESEARCH DRIVE  
 City IRVINE State CA Zip Code 92618-4286  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MAXIM FLEXPAC Occupation BUSINESS OWNER  
 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  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06513**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2276 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. DANIEL TREBUS**  
Full Name (Last, First, Middle Initial)

Mailing Address 20215 S RIVER RANCH RD W

City	State	Zip Code
CLAREMORE	OK	74019-5569

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
USPHS	DENTIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2014

**Transaction ID : 2014M04L11AI06514**

Amount of Each Receipt this Period  
250.00

**B. MR. LEWIS TRENTMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 480

City	State	Zip Code
HOMINY	OK	74035-0480

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SELF-EMPLOYED	RANCHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI06515**

Amount of Each Receipt this Period  
1.00

**C. MRS. GLENDORA R. TRESCHER**  
Full Name (Last, First, Middle Initial)

Mailing Address 8523 THACKERY STREET  
APARTMENT 6008

City	State	Zip Code
DALLAS	TX	75225-3915

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2014

**Transaction ID : 2014M04L11AI06516**

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	551.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2277 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILBUR E. TRESSLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 5862 N. COUNTY ROAD 400 E.

City GREENSBURG	State IN	Zip Code 47240-8556
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : 2014M04L11AI06517**

Amount of Each Receipt this Period  
31.00

**B. MR. JONATHAN TREST**  
Full Name (Last, First, Middle Initial)

Mailing Address 3526 CULKIN ROAD

City VICKSBURG	State MS	Zip Code 39183-9325
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2014

**Transaction ID : 2014M04L11AI06518**

Amount of Each Receipt this Period  
50.00

**C. MS. YVONNE TREST**  
Full Name (Last, First, Middle Initial)

Mailing Address 13 SUMMERVILLE LANE

City AUGUSTA	State GA	Zip Code 30909-1813
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NURSE/OFFICE MANAGER	Occupation NURSE/OFFICE MANAGER
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2014

**Transaction ID : 2014M04L11AI06519**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	181.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2278 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. YVONNE TREST**  
Full Name (Last, First, Middle Initial)

Mailing Address 13 SUMMERVILLE LANE

City AUGUSTA State GA Zip Code 30909-1813

FEC ID number of contributing federal political committee. **C**

Name of Employer NURSE/OFFICE MANAGER Occupation NURSE/OFFICE MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
03 / 26 / 2014  
Transaction ID : 2014M04L11AI06520

Amount of Each Receipt this Period  
250.00

**B. COL. LOUIS B. TREVATHAN U.S.A. (RE**  
Full Name (Last, First, Middle Initial)

Mailing Address 12000 N. 90TH STREET APARTMENT 1022

City SCOTTSDALE State AZ Zip Code 85260-8628

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1111.00

Date of Receipt  
03 / 26 / 2014  
Transaction ID : 2014M04L11AI06521

Amount of Each Receipt this Period  
501.00

**C. MR. MERCER C. TREVERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 3604 OAK RIM WAY

City SALT LAKE CITY State UT Zip Code 84109-3834

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
03 / 11 / 2014  
Transaction ID : 2014M04L11AI06522

Amount of Each Receipt this Period  
305.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1056.00

**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 2279 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. DR. CHARLES RAY TRIBBETT</b>		Date of Receipt 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI06523</b>
Mailing Address 7188 E. 250 N.		Amount of Each Receipt this Period 2000.00
City MONTICELLO	State IN	Zip Code 47960-7478
FEC ID number of contributing federal political committee. C		
Name of Employer FRANCISSAN ALLIANCE	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. MR. JAMES L. TRIBBLE</b>		Date of Receipt 03 / 05 / 2014 <b>Transaction ID : 2014M04L11AI06524</b>
Mailing Address 415 BAYOU COVE COURT		Amount of Each Receipt this Period 500.00
City HOUSTON	State TX	Zip Code 77042-1322
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. MR. GARY TRIDER</b>		Date of Receipt 03 / 11 / 2014 <b>Transaction ID : 2014M04L11AI06525</b>
Mailing Address 7950 MESA TRAILS CIRCLE		Amount of Each Receipt this Period 100.00
City AUSTIN	State TX	Zip Code 78731-1445
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2280 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. KAREN M. TRIPLETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5638 MATTERHORN DRIVE  
 City FRIDLEY State MN Zip Code 55432-5925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06526**  
 Amount of Each Receipt this Period  
 50.00

**B. MS. KAREN M. TRIPLETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5638 MATTERHORN DRIVE  
 City FRIDLEY State MN Zip Code 55432-5925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06527**  
 Amount of Each Receipt this Period  
 30.00

**C. MS. KAREN M. TRIPLETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5638 MATTERHORN DRIVE  
 City FRIDLEY State MN Zip Code 55432-5925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06528**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2281 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. JOHN TRIPODI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 245  
 City WICOMICO CHURCH State VA Zip Code 22579-0245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06529**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. FRANK J. TRITZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16714 MARBLE AVENUE  
 City LEMARS State IA Zip Code 51031-8507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TRITZ PALLET, INC. Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06530**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. RONALD R. TROK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 50718  
 City MENDOTA State MN Zip Code 55150-0718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06531**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	860.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2282 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ROBERT GUY TROKE**

Mailing Address 10219 CONE GROVE ROAD

City State Zip Code  
RIVERVIEW FL 33578-5823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
BEARITAS PRESIDENT OF COMPANY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06532**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. MR. THEODORE W. TROY**

Mailing Address 4622 21ST STREET N.

City State Zip Code  
ARLINGTON VA 22207-2204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06533**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. MR. THEODORE W. TROY**

Mailing Address 4622 21ST STREET N.

City State Zip Code  
ARLINGTON VA 22207-2204

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06534**

Amount of Each Receipt this Period  
275.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1025.00

**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 2283 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. EDUARDO ANTONIO TROZ OBANDO**

Mailing Address P.O. BOX 24070

City State Zip Code  
SAN FRANCISCO CA 94124-0070

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED ENGINEER

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  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06535**

Amount of Each Receipt this Period  
150.00

Full Name (Last, First, Middle Initial)  
**B. MR. DAVID M. TRUAX**

Mailing Address 11747 FORT CAROLINE ROAD

City State Zip Code  
JACKSONVILLE FL 32225-1604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06536**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**C. MR. DAVID M. TRUAX**

Mailing Address 11747 FORT CAROLINE ROAD

City State Zip Code  
JACKSONVILLE FL 32225-1604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06537**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 251.00

**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 2284 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. LAURIE A. TRUDGEON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 315 HAMPDEN AVENUE  
 City NARBERTH State PA Zip Code 19072-1911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MAIN LINE GASTROENTEROLOGY ASSOCIA Occupation MEDICAL SECRETARY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06538**  
 Amount of Each Receipt this Period 106.00

**B. MRS. NATALIE J. TRYON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 357 CALOOSA PALMS COURT  
 City SUN CITY CENTER State FL Zip Code 33573-6935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06539**  
 Amount of Each Receipt this Period 100.00

**C. MS. MARGARET TSAI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1420 FREDENSBORG CANYON ROAD  
 City SOLVANG State CA Zip Code 93463-2038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06540**  
 Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5206.00  
**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 2285 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ELDRED TUBBS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 730 W. 11TH STREET  
 City CLAREMONT State CA Zip Code 91711-3748  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06541**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. RICHARD C. TUCKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2552 E. ALAMEDA UNIT 100  
 City DENVER State CO Zip Code 92211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06542**  
 Amount of Each Receipt this Period  
 600.00

**C. MR. THOMAS R. TUCKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10919 SPYGLASS DRIVE  
 City RANCHO CUCAMONGA State CA Zip Code 91730-6327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06543**  
 Amount of Each Receipt this Period  
 35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	636.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2286 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS R. TUCKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10919 SPYGLASS DRIVE  
 City RANCHO CUCAMONGA State CA Zip Code 91730-6327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06544**  
 Amount of Each Receipt this Period 1.00

**B. MR. EDWARD A. TUCZYNSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13930 BUNRATTY AVENUE  
 City ROSEMOUNT State MN Zip Code 55068-3470  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06545**  
 Amount of Each Receipt this Period 150.00

**C. MR. HOWARD TUGGEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 558 TIMBER RIDGE DRIVE  
 City TROPHY CLUB State TX Zip Code 76262-5645  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06546**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 251.00  
**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 2287 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HOWARD TUGGEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 558 TIMBER RIDGE DRIVE

City TROPHY CLUB State TX Zip Code 76262-5645

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06547**

Amount of Each Receipt this Period  
 50.00

**B. MR. HOWARD TUGGEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 558 TIMBER RIDGE DRIVE

City TROPHY CLUB State TX Zip Code 76262-5645

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

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  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06548**

Amount of Each Receipt this Period  
 50.00

**C. MRS. SARAH TULL**  
Full Name (Last, First, Middle Initial)

Mailing Address 138 CHEROKEE ROAD  
APARTMENT 7

City CHARLOTTE State NC Zip Code 28207-1900

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06549**

Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2288 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD L. TULLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1004 16TH STREET  
 City ABERNATHY State TX Zip Code 79311-2004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 791.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06550**  
 Amount of Each Receipt this Period 111.00

**B. MR. DANIEL P. TULLY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 76 GOMEZ ROAD  
 City HOBE SOUND State FL Zip Code 33455-2329  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06551**  
 Amount of Each Receipt this Period 1000.00

**C. MR. MAU HOI TUNG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 DANFORTH AVENUE  
 City JERSEY CITY State NJ Zip Code 07305-3940  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CONSTRUCTION MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06552**  
 Amount of Each Receipt this Period 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1161.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2289 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD TURISINI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 315 REFLECTION COURT  
 City State Zip Code  
 GARDNERVILLE NV 89460-9758  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06553**  
 Amount of Each Receipt this Period  
 220.00

**B. MRS. KATHLEEN V. TURLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1551 FRANKLIN STREET SE  
 APARTMENT 2021  
 City State Zip Code  
 GRAND RAPIDS MI 49506-3337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06554**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. CODY TURNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 RISA WAY  
 APARTMENT 258  
 City State Zip Code  
 CHICO CA 95973-5021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 755.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06555**  
 Amount of Each Receipt this Period  
 75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 345.00  
**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 2290 OF 2949
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. CODY TURNER**

Mailing Address 100 RISA WAY  
APARTMENT 258

City CHICO State CA Zip Code 95973-5021

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
755.00

Date of Receipt  
03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06556**

Amount of Each Receipt this Period  
75.00

Full Name (Last, First, Middle Initial)  
**B. MR. CODY TURNER**

Mailing Address 100 RISA WAY  
APARTMENT 258

City CHICO State CA Zip Code 95973-5021

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
755.00

Date of Receipt  
03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06557**

Amount of Each Receipt this Period  
60.00

Full Name (Last, First, Middle Initial)  
**C. MR. CODY TURNER**

Mailing Address 100 RISA WAY  
APARTMENT 258

City CHICO State CA Zip Code 95973-5021

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
755.00

Date of Receipt  
03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06558**

Amount of Each Receipt this Period  
75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 210.00

**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 2291 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. RETHA J. TURNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4500 LORRAINE AVENUE  
 City DALLAS State TX Zip Code 75205-3613  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06559**  
 Amount of Each Receipt this Period  
 1000.00

**B. MR. THOMAS H. TURNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2250 KLEINERT AVENUE  
 City BATON ROUGE State LA Zip Code 70806-6714  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TURNER INDUSTRIES Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06560**  
 Amount of Each Receipt this Period  
 32400.00

**C. MR. VERNON TURNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5147 MARK BROWN ROAD N.E.  
 City DALTON State GA Zip Code 30721-6922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06561**  
 Amount of Each Receipt this Period  
 80.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	33480.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2292 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. VERNON TURNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5147 MARK BROWN ROAD N.E.  
 City State Zip Code  
 DALTON GA 30721-6922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06562**  
 Amount of Each Receipt this Period  
 81.00

**B. MR. VERNON TURNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5147 MARK BROWN ROAD N.E.  
 City State Zip Code  
 DALTON GA 30721-6922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06563**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. WILLIAM B. TURNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1919 GARRARD STREET  
 LOT 7  
 City State Zip Code  
 COLUMBUS GA 31906-1183  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06564**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 381.00  
**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 2293 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM L. TURNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 125 N. BROADWAY STREET  
 P. O. BOX 289  
 City SHELBYVILLE State IL Zip Code 62565-1601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06565**  
 Amount of Each Receipt this Period  
 300.00

**B. MRS. PATRICIA TURNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10014 ESTES HILL LANE  
 City CONROE State TX Zip Code 77302-4144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06566**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. PATRICIA TURNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10014 ESTES HILL LANE  
 City CONROE State TX Zip Code 77302-4144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06567**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	501.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2294 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CARLETON D. TURPIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13631 FLOYD CIRCLE  
 City DALLAS State TX Zip Code 75243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06568**  
 Amount of Each Receipt this Period  
 410.00

**B. MR. THEODORE C. TURPIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 S BROADWAY PL APT 1366  
 City TUCSON State AZ Zip Code 85710-3795  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06569**  
 Amount of Each Receipt this Period  
 130.00

**C. MR. BOB H. TUTTLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9701 WILSHIRE BOULEVARD SUITE 1100  
 City BEVERLY HILLS State CA Zip Code 90212-2011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TUTTLE-CLICK AUTOMOTIVE Occupation PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 22400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06570**  
 Amount of Each Receipt this Period  
 22400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	22940.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2295 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. LEE L.D. TUTTLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4718 HALLMARK DRIVE  
 APARTMENT 102  
 City HOUSTON State TX Zip Code 77056-3911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06571**  
 Amount of Each Receipt this Period  
 100.00

**B. DR. LEE L.D. TUTTLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4718 HALLMARK DRIVE  
 APARTMENT 102  
 City HOUSTON State TX Zip Code 77056-3911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06572**  
 Amount of Each Receipt this Period  
 65.00

**C. MR. PETER TWIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1621 SAWYERS BAR RD  
 City ETNA State CA Zip Code 96027-9401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06573**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 215.00  
**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 2296 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DAVID TWYVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 949 NW OVERTON ST  
 UNIT 312  
 City PORTLAND State OR Zip Code 97209-3268  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation TELECOMMUNICATIONS EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06574**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. JOE TYDLASKA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4032 MARQUETTE STREET  
 City DALLAS State TX Zip Code 75225-5433  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VENABLE EXPLORATION, LTD. Occupation C.P.A.  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06575**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. MICHAEL G. TYE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 844  
 City LA HABRA State CA Zip Code 90633-0844  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ADVANCED BENEFIT CENTER Occupation SALES  
 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  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06576**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2297 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD E. TYKESON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1144 WILLAGILLESPIE ROAD  
 SUITE 33  
 City EUGENE State OR Zip Code 97401-6722  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TYKESON/ASSOCIATES ENTERPRISES Occupation PRIVATE INVESTMENTS  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06577**  
 Amount of Each Receipt this Period  
**5000.00**

**B. MS. EVELYN BURTON TYLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 207 VALLEY VIEW DRIVE  
 City ROCKMART State GA Zip Code 30153-2127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06578**  
 Amount of Each Receipt this Period  
**120.00**

**C. MRS. IDA TYLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 103 MESQUITE STREET  
 City COLUMBUS State TX Zip Code 78934-2018  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **231.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06579**  
 Amount of Each Receipt this Period  
**116.00**

**SUBTOTAL** of Receipts This Page (optional)..... **5236.00**  
**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 2298 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JOANN S. TYLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 98 WHITLOCK AVENUE  
 APARTMENT 3102  
 City MARIETTA State GA Zip Code 30064-2370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06580**  
 Amount of Each Receipt this Period  
 50.00

**B. MRS. JOYCE TYLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1027 JICARILLA STREET  
 City HOBBS State NM Zip Code 88240-0968  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06581**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. MARGARET L. TYLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11245 SHORELINE DRIVE  
 APARTMENT 221  
 City TYLER State TX Zip Code 75703-7468  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 620.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06582**  
 Amount of Each Receipt this Period  
 180.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	480.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2300 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARY TYNAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 721 W. MARDO CIRCLE

City State Zip Code  
SIOUX FALLS SD 57108-3816

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06586**

Amount of Each Receipt this Period  
250.00

**B. DR. CHARLES M. TYNDAL**  
Full Name (Last, First, Middle Initial)

Mailing Address 7012 FOUNDERS DRIVE

City State Zip Code  
VESTAVIA AL 35242-2509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06587**

Amount of Each Receipt this Period  
50.00

**C. MS. LAURA LEE TYNES**  
Full Name (Last, First, Middle Initial)

Mailing Address 209 WELLINGTON DRIVE

City State Zip Code  
WOODWAY TX 76712-7733

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HARVEY ADVERTISING COMPANY, INC. EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06588**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00

**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 2301 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HENRY A. TYROCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7715 COLONY STREET  
 City HOUSTON State TX Zip Code 77036-6009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06589**  
 Amount of Each Receipt this Period  
 200.00

**B. MRS. MARGARET A. UGONE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 309 WESTVIEW COURT N.E.  
 City VIENNA State VA Zip Code 22180-4731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06590**  
 Amount of Each Receipt this Period  
 110.00

**C. MS. REBECCA A. UHL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6021 PEMBROKE PLACE  
 City INDIANAPOLIS State IN Zip Code 46220-5221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06591**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 360.00  
**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 2302 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. DANIEL ULIK**

Mailing Address 9969 S. 60TH STREET

City State Zip Code  
FRANKLIN WI 53132-8824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
STU'S FLOORING MANAGER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06592**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. MRS. IRMGARD ANNA ULLIUS**

Mailing Address 2832 AIRPORT ROAD

City State Zip Code  
PANAMA CITY FL 32405-2850

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06593**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. MRS. IRMGARD ANNA ULLIUS**

Mailing Address 2832 AIRPORT ROAD

City State Zip Code  
PANAMA CITY FL 32405-2850

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06594**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 950.00

**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 2303 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. RICHARD ULLMAN**

Mailing Address 23730 SPRUCE MEADOW COURT

City VALENCIA State CA Zip Code 91354-1899

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PRESIDENT & C.E.O.

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06595**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. MR. JAMES C. ULMER JR.**

Mailing Address 1912 HEIDELBERG DRIVE

City MOUNT PLEASANT State SC Zip Code 29464-3959

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06596**

Amount of Each Receipt this Period  
1.00

Full Name (Last, First, Middle Initial)  
**C. DR. ANTHONY A. UMOLU**

Mailing Address 2201 BAYVIEW DRIVE

City MICHIGAN CITY State IN Zip Code 46360-1571

FEC ID number of contributing federal political committee. **C**

Name of Employer FRANKLIN CLINIC Occupation PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06597**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 551.00

**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 2304 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. ANTHONY A. UMOLU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2201 BAYVIEW DRIVE  
 City MICHIGAN CITY State IN Zip Code 46360-1571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FRANKLIN CLINIC Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06598**  
 Amount of Each Receipt this Period 251.00

**B. MS. CLAIRE UNDERWOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1161 RIVERSIDE DRIVE  
 City VASSALBORO State ME Zip Code 04989-4102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06599**  
 Amount of Each Receipt this Period 250.00

**C. MR. WILLIAM T. UNDERWOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9455 RIVER LAKE DRIVE  
 City ROSWELL State GA Zip Code 30075-5037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06600**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 601.00  
**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 2305 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD L. UPTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12 RED BUD LANE  
 City SPRINGFIELD State IL Zip Code 62712-8749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06601**  
 Amount of Each Receipt this Period  
 390.00

**B. MS. SYLVIA URLICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2500 S.W. 75TH AVENUE  
 City MIAMI State FL Zip Code 33155-2805  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06602**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. CHARLES J. URSTADT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 321 RAILROAD AVENUE  
 City GREENWICH State CT Zip Code 06830-6389  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06603**  
 Amount of Each Receipt this Period  
 32400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32840.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2306 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ELINOR F. URSTADT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 BEECHWOOD ROAD  
 City BRONXVILLE State NY Zip Code 10708-3202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06604**  
 Amount of Each Receipt this Period  
 32400.00

**B. MRS. DIANE M. USHINSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5160 N. CAMINO SUMO  
 City TUCSON State AZ Zip Code 85718-6044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06605**  
 Amount of Each Receipt this Period  
 405.00

**C. MRS. PATRICIA K. UTTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 356  
 City AKRON State IN Zip Code 46910-0356  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06606**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32905.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2307 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. NAMIK K. UZSOY**  
Full Name (Last, First, Middle Initial)

Mailing Address 937 ROTHWOOD ROAD

City LYNCHBURG State VA Zip Code 24503-1113

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 985.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06607**

Amount of Each Receipt this Period  
 750.00

**B. MR. THOMAS VACCARO**  
Full Name (Last, First, Middle Initial)

Mailing Address 124 MONTROSE

City WILLIAMSBURG State VA Zip Code 23188-7401

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. ARMY Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06608**

Amount of Each Receipt this Period  
 225.00

**C. MR. JOHN VAKOUTIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 381 S. LAKE DRIVE  
APARTMENT 4

City PALM BEACH State FL Zip Code 33480-4544

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06609**

Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1095.00

**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 2308 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. RAYMOND VAL BUTT**

Mailing Address P.O. BOX 235

City State Zip Code  
LEWIS IA 51544-0235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06610**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. RAYMOND VAL BUTT**

Mailing Address P.O. BOX 235

City State Zip Code  
LEWIS IA 51544-0235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06611**

Amount of Each Receipt this Period  
110.00

Full Name (Last, First, Middle Initial)  
**C. MS. PAULA T. VALAD**

Mailing Address 4900 N OCEAN BLVD.  
#1717

City State Zip Code  
FORT LAUDERDALE FL 33308-2939

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06612**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 460.00

**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 2309 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALLAN S. VALANTINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1318  
 City SUGARLOAF State CA Zip Code 92386-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06613**  
 Amount of Each Receipt this Period  
 110.00

**B. MR. ALLAN S. VALANTINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1318  
 City SUGARLOAF State CA Zip Code 92386-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06614**  
 Amount of Each Receipt this Period  
 111.00

**C. MR. SCOTT VALANTINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1318  
 City SUGARLOAF State CA Zip Code 92386-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 751.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06615**  
 Amount of Each Receipt this Period  
 105.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 326.00  
**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 2310 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SCOTT VALANTINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1318  
 City SUGARLOAF State CA Zip Code 92386-1318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 751.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06616**  
 Amount of Each Receipt this Period  
 111.00

**B. MR. WILLIAM M. VALIGURA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12804 DESERT SKY AVENUE N.E.  
 City ALBUQUERQUE State NM Zip Code 87111-8049  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06617**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. QUENTIN VALKEMA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1616 WESTWOOD LANE  
 City FREEPORT State IL Zip Code 61032-4620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06618**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 461.00  
**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 2311 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT R. VALLEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 623 STOLP AVENUE  
 City SYRACUSE State NY Zip Code 13207-1227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06619**  
 Amount of Each Receipt this Period  
 30.00

**B. MR. ROBERT R. VALLEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 623 STOLP AVENUE  
 City SYRACUSE State NY Zip Code 13207-1227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06620**  
 Amount of Each Receipt this Period  
 45.00

**C. MR. ROBERT R. VALLEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 623 STOLP AVENUE  
 City SYRACUSE State NY Zip Code 13207-1227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06621**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2312 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE T. VAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 258 BUFFALO HILL DRIVE  
 City KALISPELL State MT Zip Code 59901-3108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06622**  
 Amount of Each Receipt this Period  
 101.00

**B. MR. JOHN VAN ACKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 SPRINGCREST ROAD  
 City EAST DUNDEE State IL Zip Code 60118-1026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06623**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. FRANCES R. VAN CAUWENBERGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8722 S. 55TH STREET E.  
 City DERBY State KS Zip Code 67037-8913  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06624**  
 Amount of Each Receipt this Period  
 70.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 271.00  
**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 2313 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. FRANCES R. VAN CAUWENBERGH**

Mailing Address 8722 S. 55TH STREET E.

City DERBY	State KS	Zip Code 67037-8913
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
295.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	10	/	2014

**Transaction ID : 2014M04L11AI06625**

Amount of Each Receipt this Period  
35.00

Full Name (Last, First, Middle Initial)  
**B. MR. JONATHAN T. VAN CLEEF**

Mailing Address 295 DOUGLAS ROAD

City FAR HILLS	State NJ	Zip Code 07931-2519
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer C.C.S.T. BUILDERS	Occupation REAL ESTATE DEVELOPER
---------------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	25	/	2014

**Transaction ID : 2014M04L11AI06625**

Amount of Each Receipt this Period  
201.00

Full Name (Last, First, Middle Initial)  
**C. MR. THEO VAN DAM**

Mailing Address 5847 ACACIA CIRCLE  
APARTMENT 1818

City EL PASO	State TX	Zip Code 79912-4881
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer US ARMY	Occupation ARMY OFFICER
-----------------------------	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	14	/	2014

**Transaction ID : 2014M04L11AI06627**

Amount of Each Receipt this Period  
150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	386.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2314 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM VAN DEN HURK**  
Full Name (Last, First, Middle Initial)

Mailing Address 64-850 MAMALAOA HIGHWAY

City KAMUELA State HI Zip Code 96743-8354

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation AUTO DEALER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06628**

Amount of Each Receipt this Period 1000.00

**B. MS. MARY KAY VAN DER GEEST**  
Full Name (Last, First, Middle Initial)

Mailing Address 5555 COUNTY ROAD A.

City MERRILL State WI Zip Code 54452-7939

FEC ID number of contributing federal political committee. **C**

Name of Employer VAN DER GEEST DAIRY CATTLE, INC. Occupation DAIRY FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06629**

Amount of Each Receipt this Period 100.00

**C. MR. WILLIAM VAN DYKE**  
Full Name (Last, First, Middle Initial)

Mailing Address 9040 N. BAYSIDE DRIVE

City MILWAUKEE State WI Zip Code 53217-1913

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2850.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06630**

Amount of Each Receipt this Period 750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1850.00

**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 2315 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CHARLES F. VAN HALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13 OLDE SARATOGA KNOLLS AVENUE  
 City State Zip Code  
 SCHUYLERVILLE NY 12871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED SCRAP DEALER  
 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  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06631**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. DUC VAN NGUYEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4578 CRAGHILL CIRCLE  
 City State Zip Code  
 STONE MOUNTAIN GA 30083-4545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BUGLE BOY INDUSTRIES SANITARY ENGINEER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06632**  
 Amount of Each Receipt this Period  
 145.00

**C. MR. TRANG VAN NGUYEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2514 DAVIDSON AVENUE  
 City State Zip Code  
 BRONX NY 10468-4262  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 336.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06633**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	495.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2316 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. TRANG VAN NGUYEN</b>		Date of Receipt 03 / 12 / 2014 <b>Transaction ID : 2014M04L11AI06634</b>
Mailing Address 2514 DAVIDSON AVENUE		Amount of Each Receipt this Period 40.00
City BRONX	State NY	Zip Code 10468-4262
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

Full Name (Last, First, Middle Initial) <b>B. MR. TRANG VAN NGUYEN</b>		Date of Receipt 03 / 21 / 2014 <b>Transaction ID : 2014M04L11AI06635</b>
Mailing Address 2514 DAVIDSON AVENUE		Amount of Each Receipt this Period 26.00
City BRONX	State NY	Zip Code 10468-4262
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

Full Name (Last, First, Middle Initial) <b>C. MR. GARTH VAN SICKLE</b>		Date of Receipt 03 / 04 / 2014 <b>Transaction ID : 2014M04L11AI06636</b>
Mailing Address 316 THE BITTER END		Amount of Each Receipt this Period 100.00
City LUSBY	State MD	Zip Code 20657-2752
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	166.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2317 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GARTH VAN SICKLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 316 THE BITTER END

City LUSBY State MD Zip Code 20657-2752

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06637**

Amount of Each Receipt this Period  
 101.00

**B. MR. LARRY VAN SICKLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 755 LAKESIDE DRIVE

City NORTH PORT State FL Zip Code 34287-1510

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06638**

Amount of Each Receipt this Period  
 250.00

**C. MR. SO VAN TRAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 4621 SOUTH QUAKER AVENUE

City TULSA State OK Zip Code 74105-4721

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06639**

Amount of Each Receipt this Period  
 95.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	446.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2318 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. SO VAN TRAN**

Mailing Address **4621 SOUTH QUAKER AVENUE**

City **TULSA**      State **OK**      Zip Code **74105-4721**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **246.00**

Date of Receipt  
**03 / 28 / 2014**  
**Transaction ID : 2014M04L11AI06640**

Amount of Each Receipt this Period  
**76.00**

Full Name (Last, First, Middle Initial)  
**B. MR. SO VAN TRAN**

Mailing Address **4621 SOUTH QUAKER AVENUE**

City **TULSA**      State **OK**      Zip Code **74105-4721**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **246.00**

Date of Receipt  
**03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI06641**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. MS. PARTHENA P. VAN WEY-MOORE**

Mailing Address **P.O. BOX A.**

City **BUFFALO**      State **TX**      Zip Code **75831-0166**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  
**03 / 31 / 2014**  
**Transaction ID : 2014M04L11AI06642**

Amount of Each Receipt this Period  
**750.00**

**SUBTOTAL** of Receipts This Page (optional)..... ► **876.00**

**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 2319 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. PAUL A. VAN WOENSEL</b>		Date of Receipt
Mailing Address 34500 SLEEPING FOX TRAIL		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City	State	Zip Code
EVERGREEN	CO	80439-9619
FEC ID number of contributing federal political committee.	Transaction ID : 2014M04L11AI06643	
	Amount of Each Receipt this Period	
	500.00	
Name of Employer	Occupation	
ENGINE & PERFORMANCE WAREHOUSE, IN	C.E.O.	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	1500.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MR. WILLIAM S. VAN ZANDT</b>		Date of Receipt
Mailing Address 138 PINNACLE CIRCLE		M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014
City	State	Zip Code
BRANDON	MS	39047-8341
FEC ID number of contributing federal political committee.	Transaction ID : 2014M04L11AI06644	
	Amount of Each Receipt this Period	
	110.00	
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	326.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. WILLIAM S. VAN ZANDT</b>		Date of Receipt
Mailing Address 138 PINNACLE CIRCLE		M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2014
City	State	Zip Code
BRANDON	MS	39047-8341
FEC ID number of contributing federal political committee.	Transaction ID : 2014M04L11AI06645	
	Amount of Each Receipt this Period	
	111.00	
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	326.00	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	721.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2320 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LAWRENCE VANCE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 41 OCEAN AVENUE  
 City NORTH WEYMOUTH State MA Zip Code 02191-1550  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06646**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. DORIS VANDERMEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3604 E. FULTON STREET APARTMENT 102  
 City GRAND RAPIDS State MI Zip Code 49546-1399  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06647**  
 Amount of Each Receipt this Period  
 350.00

**C. MR. R. VANDERWERFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1843 MAIN STREET  
 City LYNDEN State WA Zip Code 98264-1113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06648**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 650.00  
**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 2321 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. R. VANDERWERFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1843 MAIN STREET  
 City LYNDEN State WA Zip Code 98264-1113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06649**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. PETER B. VANDEVENTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 THEODORE DRIVE  
 City TINTON FALLS State NJ Zip Code 07724-2464  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LE CLAIR RYAN Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06650**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. CURTIS JON VANDEWALKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6135 KING ROAD SUITE B.  
 City LOOMIS State CA Zip Code 95650-8877  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation DENTIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06651**  
 Amount of Each Receipt this Period  
 375.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 925.00  
**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 2322 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. CHARLES EUGEN VANMULDERS</b>		Date of Receipt MM / DD / YYYY 03 / 10 / 2014 <b>Transaction ID : 2014M04L11AI06652</b>
Mailing Address 290 HUNTERS ROAD		Amount of Each Receipt this Period 81.00
City WASHINGTON	State VA	Zip Code 22747-2002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>B. MR. CHARLES EUGEN VANMULDERS</b>		Date of Receipt MM / DD / YYYY 03 / 17 / 2014 <b>Transaction ID : 2014M04L11AI06653</b>
Mailing Address 290 HUNTERS ROAD		Amount of Each Receipt this Period 20.00
City WASHINGTON	State VA	Zip Code 22747-2002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

Full Name (Last, First, Middle Initial) <b>C. MR. CHARLES EUGEN VANMULDERS</b>		Date of Receipt MM / DD / YYYY 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI06654</b>
Mailing Address 290 HUNTERS ROAD		Amount of Each Receipt this Period 21.00
City WASHINGTON	State VA	Zip Code 22747-2002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 21.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	81.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2323 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. CHARLES EUGEN VANMULDERS**

Mailing Address 290 HUNTERS ROAD

City WASHINGTON State VA Zip Code 22747-2002

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06655**

Amount of Each Receipt this Period  
 200.00

Full Name (Last, First, Middle Initial)  
**B. MR. ALLEN VANOS**

Mailing Address 82 CAPE HORN AVENUE

City WINTER HAVEN State FL Zip Code 33880-6512

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06656**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**C. MR. ALLEN VANOS**

Mailing Address 82 CAPE HORN AVENUE

City WINTER HAVEN State FL Zip Code 33880-6512

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06657**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	220.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2324 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. ALLEN VANOS**

Mailing Address 82 CAPE HORN AVENUE

City State Zip Code  
WINTER HAVEN FL 33880-6512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06658**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. D. LEROY VANSANDT**

Mailing Address 5000 LISAS LANE

City State Zip Code  
SMITHVILLE MO 64089-9034

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06659**

Amount of Each Receipt this Period  
120.00

Full Name (Last, First, Middle Initial)  
**C. MR. WILLIAM H. VARN JR.**

Mailing Address P. O. BOX 8

City State Zip Code  
SMOAKS SC 29481-0008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
EBSC BANKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
681.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06660**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 270.00

**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 2325 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM H. VARN JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 8  
 City SMOAKS State SC Zip Code 29481-0008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EBSC Occupation BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 681.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06661**  
 Amount of Each Receipt this Period  
 211.00

**B. MRS. ROSA T. VASAPOLLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1326 JUANITA WAY  
 City CAMPBELL State CA Zip Code 95008-6307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06662**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. NORMAN JEROME VASCOCU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 817  
 City RAYVILLE State LA Zip Code 71269-0817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RICHLAND STATE BANK Occupation BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06663**  
 Amount of Each Receipt this Period  
 211.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 472.00  
**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 2326 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. P. W. VASSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 3012  
 City NATCHEZ State MS Zip Code 39121-3012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation OIL DEVELOPER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06664**  
 Amount of Each Receipt this Period  
 340.00

**B. MR. GEORGE C. VAUGHAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 217 BURR ROAD  
 City SAN ANTONIO State TX Zip Code 78209-5903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VAUGHAN & SON, INC. Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06665**  
 Amount of Each Receipt this Period  
 500.00

**C. MRS. M. CARY VAUGHN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 3972  
 City MERIDIAN State MS Zip Code 39303-3972  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06666**  
 Amount of Each Receipt this Period  
 201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1041.00  
**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 2327 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD VAUGHN**  
Full Name (Last, First, Middle Initial)

Mailing Address 6002 E. CALLE SILVOSA

City TUCSON State AZ Zip Code 85711-6919

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06667**

Amount of Each Receipt this Period  
 200.00

**B. MR. RONALD VAUGHN**  
Full Name (Last, First, Middle Initial)

Mailing Address 6002 E. CALLE SILVOSA

City TUCSON State AZ Zip Code 85711-6919

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06668**

Amount of Each Receipt this Period  
 101.00

**C. MR. BRIAN L. VCULEK**  
Full Name (Last, First, Middle Initial)

Mailing Address 8053 116TH AVENUE S.E.

City GWINNER State ND Zip Code 58040-9767

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06669**

Amount of Each Receipt this Period  
 90.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 391.00

**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 2328 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. BRIAN L. VCULEK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8053 116TH AVENUE S.E.  
 City GWINNER State ND Zip Code 58040-9767  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06670**  
 Amount of Each Receipt this Period 120.00

**B. MR. JOSEPH J. VEDRA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12200 NEOWASH ROAD  
 City WHITEHOUSE State OH Zip Code 43571-9715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06671**  
 Amount of Each Receipt this Period 110.00

**C. MR. JOSEPH J. VEDRA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12200 NEOWASH ROAD  
 City WHITEHOUSE State OH Zip Code 43571-9715  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06672**  
 Amount of Each Receipt this Period 111.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	341.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2329 OF 2949		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT B. VEECH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4340 OLDE PINE LANE  
 City JACKSONVILLE State FL Zip Code 32217-4718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06673**  
 Amount of Each Receipt this Period  
 10.00

**B. MR. ROBERT B. VEECH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4340 OLDE PINE LANE  
 City JACKSONVILLE State FL Zip Code 32217-4718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06674**  
 Amount of Each Receipt this Period  
 35.00

**C. MR. ROBERT B. VEECH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4340 OLDE PINE LANE  
 City JACKSONVILLE State FL Zip Code 32217-4718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06675**  
 Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2330 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. ROBERT B. VEECH</b>		Date of Receipt 03 / 18 / 2014 <b>Transaction ID : 2014M04L11AI06676</b>
Mailing Address 4340 OLDE PINE LANE		Amount of Each Receipt this Period 40.00
City JACKSONVILLE	State FL	Zip Code 32217-4718
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Full Name (Last, First, Middle Initial) <b>B. MR. ROBERT B. VEECH</b>		Date of Receipt 03 / 24 / 2014 <b>Transaction ID : 2014M04L11AI06677</b>
Mailing Address 4340 OLDE PINE LANE		Amount of Each Receipt this Period 40.00
City JACKSONVILLE	State FL	Zip Code 32217-4718
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Full Name (Last, First, Middle Initial) <b>C. MR. ROBERT B. VEECH</b>		Date of Receipt 03 / 25 / 2014 <b>Transaction ID : 2014M04L11AI06678</b>
Mailing Address 4340 OLDE PINE LANE		Amount of Each Receipt this Period 35.00
City JACKSONVILLE	State FL	Zip Code 32217-4718
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	115.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2331 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MELISSA VEGHTE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 TWADDELL MILL ROAD  
 City State Zip Code  
 WILMINGTON DE 19807-1226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06679**  
 Amount of Each Receipt this Period  
 250.00

**B. DR. A. OMAR VENTO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 440247  
 City State Zip Code  
 MIAMI FL 33144-0247  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06680**  
 Amount of Each Receipt this Period  
 50.00

**C. DOCTOR ERIC R. VERA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1012 CHESTNUT CREEK DRIVE  
 City State Zip Code  
 VILLA RICA GA 30180-5844  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED MEDICAL DOCTOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06681**  
 Amount of Each Receipt this Period  
 500.00

**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: PAGE 2332 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MARTIN VERBRUGGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4905 SCENIC DRIVE  
 City YAKIMA State WA Zip Code 98908-2226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 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  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06682**  
 Amount of Each Receipt this Period  
 300.00

**B. MS. SHERRY KAY VERDEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7846 CLOVER RIDGE AVENUE  
 City BATON ROUGE State LA Zip Code 70820-8313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SHENANDOAH ELEMENTARY Occupation COUNSELOR  
 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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06683**  
 Amount of Each Receipt this Period  
 100.00

**C. DR. JOHN J. VERDON JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55 OCEAN AVENUE UNIT 9G  
 City MONMOUTH BEACH State NJ Zip Code 07750-1370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06684**  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1400.00  
**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 2333 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN A. VERHOFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 145 E. HARTSDALE AVENUE  
 APARTMENT 2A  
 City HARTSDALE State NY Zip Code 10530-3306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06685**  
 Amount of Each Receipt this Period 121.00

**B. MR. MARC J. VERISSIMO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1271 VIA HUERTA  
 City LOS ALTOS State CA Zip Code 94024-7169  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer S.V.B. FINANCIAL GROUP Occupation BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06686**  
 Amount of Each Receipt this Period 460.00

**C. JOHN VERNON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3312 LONESOME MOUNTAIN ROAD  
 City CHARLOTTESVILLE State VA Zip Code 22911-6012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06687**  
 Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 881.00  
**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 2334 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES VESPOLI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 GILETTA COURT  
 City CLOSTER State NJ Zip Code 07624-2904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06688**  
 Amount of Each Receipt this Period  
 201.00

**B. MRS. DOROTHY VICTORELLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 SAINT MARK AVENUE APARTMENT 3319  
 City LITITZ State PA Zip Code 17543-2250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06689**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. DOROTHY VICTORELLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 SAINT MARK AVENUE APARTMENT 3319  
 City LITITZ State PA Zip Code 17543-2250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06690**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	301.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2335 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DOROTHY VICTORELLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 SAINT MARK AVENUE  
 APARTMENT 3319  
 City LITITZ State PA Zip Code 17543-2250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06691**  
 Amount of Each Receipt this Period  
 51.00

**B. MRS. DOROTHY VICTORELLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 SAINT MARK AVENUE  
 APARTMENT 3319  
 City LITITZ State PA Zip Code 17543-2250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06692**  
 Amount of Each Receipt this Period  
 40.00

**C. MR. JAVIER E. VIJIL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7910 S.W. 64TH TERRACE  
 City MIAMI State FL Zip Code 33143-2609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer TRANSATLANTIC R.E. Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06693**  
 Amount of Each Receipt this Period  
 290.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	381.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2336 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. LIONEL A. VILLALPANDO</b>		Date of Receipt
Mailing Address 6342 N. 13TH ST.		M M M / D D D / Y Y Y Y Y Y 03 / 04 / 2014
City	State	Zip Code
PHOENIX	AZ	85014-1425
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI06694
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		120.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	420.00	

Full Name (Last, First, Middle Initial) <b>B. MR. LIONEL A. VILLALPANDO</b>		Date of Receipt
Mailing Address 6342 N. 13TH ST.		M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014
City	State	Zip Code
PHOENIX	AZ	85014-1425
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI06695
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		100.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	420.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. EVELYN VILLARI</b>		Date of Receipt
Mailing Address P.O. BOX 477		M M M / D D D / Y Y Y Y Y Y 03 / 21 / 2014
City	State	Zip Code
PASS CHRISTIAN	MS	39571-0477
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI06696
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		220.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	440.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	440.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2337 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SHIRLEY SAMPLES VILLASANA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2318 W. 18TH STREET  
 APARTMENT 95  
 City HOUSTON State TX Zip Code 77008-1166  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06697**  
 Amount of Each Receipt this Period  
 220.00

**B. MS. SHIRLEY SAMPLES VILLASANA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2318 W. 18TH STREET  
 APARTMENT 95  
 City HOUSTON State TX Zip Code 77008-1166  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06698**  
 Amount of Each Receipt this Period  
 200.00

**C. MR. JOSEPH ALLEN VILLERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14380 RIVA DEL LAGO DRIVE  
 APARTMENT 1903  
 City FORT MYERS State FL Zip Code 33907-7832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 371.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06699**  
 Amount of Each Receipt this Period  
 121.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	541.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2338 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. G. MICHAEL VINCENT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1435 AMBASSADOR WAY

City SALT LAKE CITY State UT Zip Code 84108-2858

FEC ID number of contributing federal political committee. **C**

Name of Employer NOT EMPLOYED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06700**

Amount of Each Receipt this Period 100.00

**B. MR. G. MICHAEL VINCENT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1435 AMBASSADOR WAY

City SALT LAKE CITY State UT Zip Code 84108-2858

FEC ID number of contributing federal political committee. **C**

Name of Employer NOT EMPLOYED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06701**

Amount of Each Receipt this Period 25.00

**C. MR. ROBERT CARR VINCENT**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 7340

City AMARILLO State TX Zip Code 79114-7340

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation RANCHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06702**

Amount of Each Receipt this Period 275.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00

**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 2339 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WALTER F. VINES**  
Full Name (Last, First, Middle Initial)

Mailing Address 174 MORRISON AVENUE

City STATEN ISLAND State NY Zip Code 10310-2835

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1101.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06703**

Amount of Each Receipt this Period  
 276.00

**B. MS. VIRGINIA M. VIRKLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 5858 MIDNIGHT PASS ROAD

City SARASOTA State FL Zip Code 34242-2108

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

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  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06704**

Amount of Each Receipt this Period  
 200.00

**C. MR. EMIL A. VOELZ JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 967-1 EDGEEMERE COURT

City COPLEY State OH Zip Code 44321-1685

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06705**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	576.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2340 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. WESS R. VOGT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 423 E. NORTH POINT ROAD  
 City THIENSVILLE State WI Zip Code 53092-5824  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer W.P.S. Occupation PSYCHIATRIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06706**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. DAVID VOIGTSBERGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10685 SW STONY CREEK WAY APARTMENT 1314  
 City PORT SAINT LUCIE State FL Zip Code 34987-2741  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06707**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JOHN M. VOLKHARDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 84 TOPPIN DRIVE  
 City HILTON HEAD ISLAND State SC Zip Code 29926-1025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06708**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2341 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN M. VOLKHARDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 84 TOPPIN DRIVE  
 City State Zip Code  
 HILTON HEAD ISLAND SC 29926-1025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06709**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. JOHN M. VOLKHARDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 84 TOPPIN DRIVE  
 City State Zip Code  
 HILTON HEAD ISLAND SC 29926-1025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06710**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. ALFRED A. VOLKMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1435 ARUNDEL WAY  
 City State Zip Code  
 MELBOURNE FL 32940-2190  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED ATTORNEY  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06711**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 171.00  
**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 2342 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. HERBERT EDWIN VON FRAGSTEIN**

Mailing Address 57 SOUTHWIND DRIVE

City State Zip Code  
BELLEAIR BLUFFS FL 33770-2043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
395.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06712**

Amount of Each Receipt this Period  
275.00

Full Name (Last, First, Middle Initial)  
**B. MR. GEORGE A. VONDERLINDEN**

Mailing Address P. O. BOX 298

City State Zip Code  
EDWARDS CO 81632-0298

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06713**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**C. MR. OTTO W. VOSAHLIK**

Mailing Address 7515 NANTUCKET DRIVE  
APARTMENT 408

City State Zip Code  
DARIEN IL 60561-4731

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06714**

Amount of Each Receipt this Period  
101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 676.00

**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 2343 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM ALEX VOXMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1135 SAINT ALBANS ROAD  
 City SAN MARINO State CA Zip Code 91108-1855  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LATHAM & WATKINS Occupation LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06715**  
 Amount of Each Receipt this Period  
 200.00

**B. MRS. PHUONG VU DO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 103 SPEICHER DRIVE  
 City ANNAPOLIS State MD Zip Code 21401-7309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06716**  
 Amount of Each Receipt this Period  
 25.00

**C. MRS. PHUONG VU DO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 103 SPEICHER DRIVE  
 City ANNAPOLIS State MD Zip Code 21401-7309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06717**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2344 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. PHUONG VU DO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 103 SPEICHER DRIVE  
 City ANNAPOLIS State MD Zip Code 21401-7309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06718**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. DINYAR S. WADIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 134 MAIN STREET  
 City NEW CANAAN State CT Zip Code 06840-5512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WADIA ENTERPRISES INC. Occupation ARCHITECT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06719**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. JAMES WADSWORTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 123 CRESTVIEW DRIVE  
 City CLANTON State AL Zip Code 35045-9605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WADSWORTH OIL COMPANY OF CLAYTON, Occupation CONVIENCE STORE OWNER  
 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  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06720**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00  
**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 2345 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN E. WAGNER SR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 129 CRABAPPLE CIRCLE

City LAKE OZARK State MO Zip Code 65049-4822

FEC ID number of contributing federal political committee. **C**

Name of Employer WAGNER INDUSTRIES, INC. Occupation CHAIRMAN & C.E.O.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06721**

Amount of Each Receipt this Period 500.00

**B. MR. THOMAS J. WAGNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4037 HIDDEN WOODS DRIVE

City BLOOMFIELD HILLS State MI Zip Code 48301-3130

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06722**

Amount of Each Receipt this Period 221.00

**C. MR. WILLIAM J WAHOFF**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 E. BROAD STREET SUITE 900

City COLUMBUS State OH Zip Code 43215-3725

FEC ID number of contributing federal political committee. **C**

Name of Employer SCOTT, SCRIVEN & WAHOFF, L.L.P. Occupation ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06723**

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 971.00

**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 2346 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM J WAHOFF**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 250 E. BROAD STREET  
 SUITE 900  
 City COLUMBUS State OH Zip Code 43215-3725  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SCOTT, SCRIVEN & WAHOFF, L.L.P. Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06724**  
 Amount of Each Receipt this Period 1.00

**B. MR. A. J. WAIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1400 ECKERT ROAD  
 City WILLOW CITY State TX Zip Code 78675-8565  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06725**  
 Amount of Each Receipt this Period 250.00

**C. MR. WILLIAM WAILES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7722 PARK RIDGE CIRCLE  
 City FORT COLLINS State CO Zip Code 80528-8908  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COLORADO STATE UNIVERSITY Occupation EDUCATION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06726**  
 Amount of Each Receipt this Period 130.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	381.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2347 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLIAM WAILES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7722 PARK RIDGE CIRCLE  
 City FORT COLLINS State CO Zip Code 80528-8908  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COLORADO STATE UNIVERSITY Occupation EDUCATION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06727**  
 Amount of Each Receipt this Period  
 130.00

**B. MR. WILLIAM WAILES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7722 PARK RIDGE CIRCLE  
 City FORT COLLINS State CO Zip Code 80528-8908  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COLORADO STATE UNIVERSITY Occupation EDUCATION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06728**  
 Amount of Each Receipt this Period  
 1.00

**C. MS. JOANNA WAITE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 52  
 City JERSEY SHORE State PA Zip Code 17740-0052  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06729**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	281.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2348 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES T. WAKEFIELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11668 S. HUDSON COURT  
 City TULSA State OK Zip Code 74137-8508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KAISER - FRANCIS OIL COMPANY Occupation PETROLEUM ENGINEER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06730**  
 Amount of Each Receipt this Period  
**250.00**

**B. MRS. P. M. WAKEFIELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 BLACKLAND DRIVE N.W.  
 City ATLANTA State GA Zip Code 30342-4405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **480.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06731**  
 Amount of Each Receipt this Period  
**150.00**

**C. MRS. P. M. WAKEFIELD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 BLACKLAND DRIVE N.W.  
 City ATLANTA State GA Zip Code 30342-4405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **480.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06732**  
 Amount of Each Receipt this Period  
**165.00**

**SUBTOTAL** of Receipts This Page (optional)..... **565.00**  
**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 2349 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ELIZABETH WALDMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 36866 S. GOLF COURSE DRIVE  
 City TUCSON State AZ Zip Code 85739-1604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06733**  
 Amount of Each Receipt this Period  
 40.00

**B. MRS. ELIZABETH WALDMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 36866 S. GOLF COURSE DRIVE  
 City TUCSON State AZ Zip Code 85739-1604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06734**  
 Amount of Each Receipt this Period  
 81.00

**C. MRS. AMELIA K. WALDRON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 71 WILDWOOD ROAD  
 City TORRINGTON State CT Zip Code 06790-4251  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06735**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	241.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2350 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. FRANCES ANN WALKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5920 N CAMINO PADRE ISIDORO  
 City TUCSON State AZ Zip Code 85718-4032  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06736**  
 Amount of Each Receipt this Period  
 200.00

**B. DR. FRANCES ANN WALKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5920 N CAMINO PADRE ISIDORO  
 City TUCSON State AZ Zip Code 85718-4032  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06737**  
 Amount of Each Receipt this Period  
 10.00

**C. MR. JOHN H. WALKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10839 SE LINDEN STREET  
 City TEQUESTA State FL Zip Code 33469-1629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06738**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	211.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2351 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. K. GRAHAME WALKER**

Mailing Address 5170 SAINT ANDREWS ISLAND DRIVE

City State Zip Code  
VERO BEACH FL 32967-7296

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
REQUESTED REQUESTED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06739**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**B. MR. PAUL M. WALKER JR.**

Mailing Address 1616 ROBERSON STREET

City State Zip Code  
DUBLIN GA 31021-3549

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06740**

Amount of Each Receipt this Period  
40.00

Full Name (Last, First, Middle Initial)  
**C. MR. RAY S. WALKER**

Mailing Address P.O. BOX 415

City State Zip Code  
BIGLER PA 16825-0415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1465.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06741**

Amount of Each Receipt this Period  
750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1290.00

**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 2352 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. RAY S. WALKER**

Mailing Address P.O. BOX 415

City State Zip Code  
BIGLER PA 16825-0415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1465.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06742**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. RAY S. WALKER**

Mailing Address P.O. BOX 415

City State Zip Code  
BIGLER PA 16825-0415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1465.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06743**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MR. ROBERT H. WALKER**

Mailing Address P.O. BOX 1189

City State Zip Code  
LEWISBURG TN 37091-0189

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06744**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00

**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 2353 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. T. URLING WALKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1170 IVES STREET  
 City WATERTOWN State NY Zip Code 13601-4215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ENGINEER/ADMINSTRATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06745**  
 Amount of Each Receipt this Period 1000.00

**B. MR. JAMES R. WALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1520 SOUTH COURT  
 City FINDLAY State OH Zip Code 45840-6832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06746**  
 Amount of Each Receipt this Period 110.00

**C. MRS. ANN WALLACE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11127 BITTERSWEET DELLS LANE  
 City FORT WAYNE State IN Zip Code 46814-8156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06747**  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1210.00  
**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 2354 OF 2949
	<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES B. WALLACE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 COTTONWOOD LANE  
 City State Zip Code  
 GREENWOOD VILLAGE CO 80121-1410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06748**  
 Amount of Each Receipt this Period  
 1000.00

**B. MRS. JEAN WALLACE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 BISHOP GADSDEN WAY  
 APARTMENT 256  
 City State Zip Code  
 CHARLESTON SC 29412-3573  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06749**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. JOHN WALLACE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3093 ABERDEEN CT  
 City State Zip Code  
 PORT HURON MI 48060-2348  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06750**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1275.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2355 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN WALLACE**  
Full Name (Last, First, Middle Initial)

Mailing Address 3093 ABERDEEN CT

City PORT HURON State MI Zip Code 48060-2348

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06751**

Amount of Each Receipt this Period  
 200.00

**B. MR. JOSEPH L. WALLACE**  
Full Name (Last, First, Middle Initial)

Mailing Address 2240 PEACHTREE ROAD NW  
APARTMENT 508

City ATLANTA State GA Zip Code 30309-1175

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06752**

Amount of Each Receipt this Period  
 120.00

**C. MRS. RENE WALLACE**  
Full Name (Last, First, Middle Initial)

Mailing Address 120 RIO GRANDE DRIVE

City MISSION State TX Zip Code 78572-7419

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06753**

Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 440.00

**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 2356 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. RENE WALLACE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 120 RIO GRANDE DRIVE  
 City MISSION State TX Zip Code 78572-7419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06754**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. RONALD W. WALLACE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 317 S. WORTH AVENUE  
 City INDIANAPOLIS State IN Zip Code 46241-0637  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06755**  
 Amount of Each Receipt this Period  
 315.00

**C. WANDA JEAN WALLACE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1950 S. A. W. GRIMES BLVD.  
 APARTMENT 102  
 City ROUND ROCK State TX Zip Code 78664-7496  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06756**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 566.00  
**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 2357 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. KENNY WALLER</b>		Date of Receipt
Mailing Address 1312 MABERLY		M M M / D D D / Y Y Y Y Y Y 03 / 12 / 2014
City	State	Zip Code
HOLDREGE	NE	68949-1248
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI06757
C		Amount of Each Receipt this Period
		750.00
Name of Employer	Occupation	
SELF	FARMER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	1215.00	

Full Name (Last, First, Middle Initial) <b>B. MR. KENNY WALLER</b>		Date of Receipt
Mailing Address 1312 MABERLY		M M M / D D D / Y Y Y Y Y Y 03 / 21 / 2014
City	State	Zip Code
HOLDREGE	NE	68949-1248
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI06758
C		Amount of Each Receipt this Period
		100.00
Name of Employer	Occupation	
SELF	FARMER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	1215.00	

Full Name (Last, First, Middle Initial) <b>C. MR. MIKE WALSH</b>		Date of Receipt
Mailing Address 4 RED ALDER COURT		M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014
City	State	Zip Code
DANVILLE	CA	94506-4548
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI06759
C		Amount of Each Receipt this Period
		150.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2358 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. RADM. WILLIAM A. WALSH USNR**  
Full Name (Last, First, Middle Initial)

Mailing Address 906 SANTA HIDALGA

City SOLANA BEACH State CA Zip Code 92075-1557

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **321.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : 2014M04L11AI06760**

Amount of Each Receipt this Period  
**1.00**

**B. MRS. HAZEL WALTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 HOWARD VALLEY ROAD

City FORSYTH State MT Zip Code 59327-9482

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : 2014M04L11AI06761**

Amount of Each Receipt this Period  
**125.00**

**C. MR. CURTIS A. WALTERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 202 EGBERT AVENUE

City STATEN ISLAND State NY Zip Code 10310-2622

FEC ID number of contributing federal political committee. **C**

Name of Employer RET. Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 17 / 2014**

**Transaction ID : 2014M04L11AI06762**

Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>226.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2359 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. CURTIS A. WALTERS</b>		Date of Receipt
Mailing Address 202 EGBERT AVENUE		M M M / D D D / Y Y Y Y Y Y 03 / 18 / 2014
City	State	Zip Code
STATEN ISLAND	NY	10310-2622
FEC ID number of contributing federal political committee.	Transaction ID : 2014M04L11AI06763	
	Amount of Each Receipt this Period	
	200.00	
Name of Employer	Occupation	
RET.	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	400.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. JEFFREY WALTERS</b>		Date of Receipt
Mailing Address 3830 W GARDEN CT		M M M / D D D / Y Y Y Y Y Y 03 / 14 / 2014
City	State	Zip Code
SALINE	MI	48176-9480
FEC ID number of contributing federal political committee.	Transaction ID : 2014M04L11AI06764	
	Amount of Each Receipt this Period	
	100.00	
Name of Employer	Occupation	
BOURNE INDUSTRIES INC	CHIEF EXECUTIVE OFFICER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	300.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MR. NOLE WALTERS</b>		Date of Receipt
Mailing Address 22268 LAKE STREET		M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014
City	State	Zip Code
CASSOPOLIS	MI	49031-9392
FEC ID number of contributing federal political committee.	Transaction ID : 2014M04L11AI06765	
	Amount of Each Receipt this Period	
	1.00	
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	301.00	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	301.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2360 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ROSALYN M. WALTERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 22268 LAKE STREET

City CASSOPOLIS State MI Zip Code 49031-9392

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **331.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 26 / 2014**

**Transaction ID : 2014M04L11AI06766**

Amount of Each Receipt this Period  
**1.00**

**B. DR. HENRY C. WALTHER**  
Full Name (Last, First, Middle Initial)

Mailing Address 6845 RANCHO LOS PAVOS LANE

City GRANITE BAY State CA Zip Code 95746-7349

FEC ID number of contributing federal political committee. **C**

Name of Employer CASE MEDICAL GROUP Occupation M.D.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 25 / 2014**

**Transaction ID : 2014M04L11AI06767**

Amount of Each Receipt this Period  
**100.00**

**C. MRS. VIRGINIA T. WALTHER**  
Full Name (Last, First, Middle Initial)

Mailing Address 6206 N. KIRKWOOD AVENUE

City CHICAGO State IL Zip Code 60646-5026

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **311.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 11 / 2014**

**Transaction ID : 2014M04L11AI06768**

Amount of Each Receipt this Period  
**35.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>136.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2361 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. VIRGINIA T. WALTHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6206 N. KIRKWOOD AVENUE  
 City CHICAGO State IL Zip Code 60646-5026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06769**  
 Amount of Each Receipt this Period  
 1.00

**B. MRS. NORINNE HOLT WALTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2246 WEDGEWOOD DR.  
 City ST GEORGE State UT Zip Code 84770-6114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06770**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. WAYNE A. WALZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11813 DOVER CIRCLE  
 City OKLAHOMA CITY State OK Zip Code 73162-3227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06771**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	351.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2362 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. HAROLD J. WANEBO**  
Full Name (Last, First, Middle Initial)

Mailing Address 116 POPPASQUASH ROAD

City BRISTOL State RI Zip Code 02809-1003

FEC ID number of contributing federal political committee. **C**

Name of Employer LANDMARK MEDICAL Occupation SURGEON

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06772**

Amount of Each Receipt this Period  
 250.00

**B. TENG J. WANG**  
Full Name (Last, First, Middle Initial)

Mailing Address 2320 STRANAHAN DRIVE

City ALHAMBRA State CA Zip Code 91803-3849

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06773**

Amount of Each Receipt this Period  
 200.00

**C. TENG J. WANG**  
Full Name (Last, First, Middle Initial)

Mailing Address 2320 STRANAHAN DRIVE

City ALHAMBRA State CA Zip Code 91803-3849

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06774**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550.00

**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 2363 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. TENG J. WANG**

Mailing Address 2320 STRANAHAN DRIVE

City ALHAMBRA	State CA	Zip Code 91803-3849
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
401.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06775**

Amount of Each Receipt this Period  
101.00

Full Name (Last, First, Middle Initial)  
**B. MS. MARY ANN WANNAMAHER**

Mailing Address 200 FRONT STREET

City GEORGETOWN	State SC	Zip Code 29440-3732
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06776**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MS. MARILYN E. WANTY**

Mailing Address 304 WOODLAND DRIVE

City CHELSEA	State MI	Zip Code 48118-2115
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06777**

Amount of Each Receipt this Period  
135.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	286.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2364 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ARTHUR CHARLES WARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25 WREN DRIVE  
 City HILTON HEAD State SC Zip Code 29928-4021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06778**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. BRIAN WARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 941 VENTANA COURT  
 City WINDSOR State CO Zip Code 80550-2843  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RANCHER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06779**  
 Amount of Each Receipt this Period  
 240.00

**C. MR. DAVID E. WARD JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 329  
 City WIMAUMA State FL Zip Code 33598-0329  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06780**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	690.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2365 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. LEW O. WARD</b>		Date of Receipt
Mailing Address 502 S. FILLMORE BOX 1187		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014
City ENID	State OK	Zip Code 73703-5703
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI06781</b>
Name of Employer SELF - EMPLOYED		Amount of Each Receipt this Period
Occupation OIL & GAS PRODUCER		15000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		15000.00

Full Name (Last, First, Middle Initial) <b>B. MRS. NANCY S. WARD</b>		Date of Receipt
Mailing Address 5535 CULVER DRIVE S.E.		M M M / D D D / Y Y Y Y Y Y 03 / 17 / 2014
City SALEM	State OR	Zip Code 97317-9281
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI06782</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		206.00

Full Name (Last, First, Middle Initial) <b>C. MR. JOHN M. WARDELL</b>		Date of Receipt
Mailing Address 1905 BAY ROAD APARTMENT 311		M M M / D D D / Y Y Y Y Y Y 03 / 12 / 2014
City VERO BEACH	State FL	Zip Code 32963-4389
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI06783</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		55.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		360.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15155.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2366 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. BEVERLY J. WARE**  
Full Name (Last, First, Middle Initial)

Mailing Address 11507 SAVANNAH LAKES DRIVE

City PARRISH	State FL	Zip Code 34219-2300
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2014

**Transaction ID : 2014M04L11AI06784**

Amount of Each Receipt this Period  
250.00

**B. MR. JOE E. WARK**  
Full Name (Last, First, Middle Initial)

Mailing Address 626 ROGER ROAD

City GLEN ELLYN	State IL	Zip Code 60137-4241
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2014

**Transaction ID : 2014M04L11AI06785**

Amount of Each Receipt this Period  
40.00

**C. MR. RICHARD B. WARNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 6767 W. MAY APPK DRIVE

City MCCORDSVILLE	State IN	Zip Code 46055
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
505.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2014

**Transaction ID : 2014M04L11AI06786**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	390.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2367 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ANN E. WARREN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1721 BRANDON WOODS DRIVE  
 City LAWRENCE State KS Zip Code 66047-2080  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **900.00**

Date of Receipt: **03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI06787**  
 Amount of Each Receipt this Period: **300.00**

**B. MS. ANN E. WARREN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1721 BRANDON WOODS DRIVE  
 City LAWRENCE State KS Zip Code 66047-2080  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **900.00**

Date of Receipt: **03 / 26 / 2014**  
**Transaction ID : 2014M04L11AI06788**  
 Amount of Each Receipt this Period: **600.00**

**C. MRS. GRACE C. WARREN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2702 CEMBALO BLVD. APARTMENT 342  
 City SAN ANTONIO State TX Zip Code 78230-3049  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **295.00**

Date of Receipt: **03 / 17 / 2014**  
**Transaction ID : 2014M04L11AI06789**  
 Amount of Each Receipt this Period: **95.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>995.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2368 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. GRACE C. WARREN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2702 CEMBALO BLVD.  
 APARTMENT 342  
 City SAN ANTONIO State TX Zip Code 78230-3049  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06790**  
 Amount of Each Receipt this Period  
 200.00

**B. MS. JILL WARREN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2150 AMELIA PLACE  
 City ANN ARBOR State MI Zip Code 48104-6305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LANDLORD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06791**  
 Amount of Each Receipt this Period  
 50.00

**C. MS. JILL WARREN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2150 AMELIA PLACE  
 City ANN ARBOR State MI Zip Code 48104-6305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation LANDLORD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06792**  
 Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2369 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL F. WARREN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 766 CLEARVIEW DRIVE  
 City CHARLESTON State SC Zip Code 29412-4509  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06793**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. ROBERT E. WARREN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 188  
 City SPRUCE HEAD State ME Zip Code 04859-0188  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06794**  
 Amount of Each Receipt this Period  
 200.00

**C. REV. AUSTIN R. WARRINER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23141 104TH STREET  
 City LIVE OAK State FL Zip Code 32060-5834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06795**  
 Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 480.00  
**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 2370 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. REV. AUSTIN R. WARRINER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23141 104TH STREET  
 City LIVE OAK State FL Zip Code 32060-5834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06796**  
 Amount of Each Receipt this Period  
 30.00

**B. MRS. MARCIA WARRINGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6718 OAKMONT WAY  
 City BRADENTON State FL Zip Code 34202-1701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06797**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. MARCIA WARRINGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6718 OAKMONT WAY  
 City BRADENTON State FL Zip Code 34202-1701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06798**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	180.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2371 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JERRY WARTSKI**  
Full Name (Last, First, Middle Initial)

Mailing Address 159 W. 53RD STREET  
APARTMENT 36E

City NEW YORK State NY Zip Code 10019-6068

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06799**

Amount of Each Receipt this Period  
1000.00

**B. MR. RAY W. WASHBURNE**  
Full Name (Last, First, Middle Initial)

Mailing Address 47 HIGHLAND PARK VILLAGE  
SUITE 200

City DALLAS State TX Zip Code 75205-2786

FEC ID number of contributing federal political committee. **C**

Name of Employer CHARTER HOLDINGS Occupation C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32400.00

Date of Receipt  
03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06800**

Amount of Each Receipt this Period  
32400.00

**C. MR. PEDRO E. WASMER**  
Full Name (Last, First, Middle Initial)

Mailing Address 642 BOUGAINVILLEA ROAD

City NAPLES State FL Zip Code 34102-5525

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06801**

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 35400.00

**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 2372 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID WASSERMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 2 VISTA DEL SOL

City MILL VALLEY State CA Zip Code 94941-4918

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF - EMPLOYED Occupation LAWYER

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  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06802**

Amount of Each Receipt this Period  
 750.00

**B. MR. WILLIAM H. WASSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1657 METROPOLITAN DR

City LONGMONT State CO Zip Code 80504-1708

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06803**

Amount of Each Receipt this Period  
 120.00

**C. MR. WILLIAM H. WASSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1657 METROPOLITAN DR

City LONGMONT State CO Zip Code 80504-1708

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06804**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 970.00

**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 2373 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. TERESA A. WATERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1253

City LEVELLAND	State TX	Zip Code 79336-1253
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation BOOKKEEPER
-----------------------------------	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06805**

Amount of Each Receipt this Period  
110.00

**B. MRS. TERESA A. WATERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1253

City LEVELLAND	State TX	Zip Code 79336-1253
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation BOOKKEEPER
-----------------------------------	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06806**

Amount of Each Receipt this Period  
50.00

**C. MR. HAYS T. WATKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2111 CEDARFIELD LANE

City RICHMOND	State VA	Zip Code 23233-1937
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
705.00

Date of Receipt  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06807**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	260.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2374 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES WATKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 506 KELLY STREET N.W.  
 City NEW PHILADELPHIA State OH Zip Code 44663-1620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06808**  
 Amount of Each Receipt this Period  
 145.00

**B. MS. LINDA WATKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 934 POP NOAH RD  
 City COLLINSVILLE State TX Zip Code 76233-3328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation ANNOUNCER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06809**  
 Amount of Each Receipt this Period  
 25.00

**C. MS. LINDA WATKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 934 POP NOAH RD  
 City COLLINSVILLE State TX Zip Code 76233-3328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation ANNOUNCER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06810**  
 Amount of Each Receipt this Period  
 25.00

**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 2375 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD WATKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 23  
 City KENDRICK State ID Zip Code 83537-0023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06811**  
 Amount of Each Receipt this Period  
 120.00

**B. DR. DAVID T. WATSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3050 RIVERMEADE LANE N.W.  
 City ATLANTA State GA Zip Code 30327-2016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06812**  
 Amount of Each Receipt this Period  
 120.00

**C. MRS. HELEN WATSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 156  
 City DELTA State UT Zip Code 84624-0156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06813**  
 Amount of Each Receipt this Period  
 35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	275.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2376 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. HELEN WATSON</b>		Date of Receipt
Mailing Address P.O. BOX 156		M M M / D D D / Y Y Y Y Y Y 03 / 10 / 2014
City	State	Zip Code
DELTA	UT	84624-0156
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI06814</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	215.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. HELEN WATSON</b>		Date of Receipt
Mailing Address P.O. BOX 156		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014
City	State	Zip Code
DELTA	UT	84624-0156
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI06815</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	215.00	

Full Name (Last, First, Middle Initial) <b>C. MR. KYLE WATSON</b>		Date of Receipt
Mailing Address 20 RIDGEWOOD DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 26 / 2014
City	State	Zip Code
LAPLACE	LA	70068-6458
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI06816</b>
Name of Employer VABRO		Amount of Each Receipt this Period
Occupation MANAGER		220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	540.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2377 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PAUL M. WATSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31656 SEA LEVEL DRIVE  
 City MALIBU State CA Zip Code 90265-2634  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06817**  
 Amount of Each Receipt this Period  
 750.00

**B. MR. RAY S. WATSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6153 SUNRISE MEADOWS LOOP  
 City RENO State NV Zip Code 89519-7339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06818**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. ROBERT A. WATSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6093 SPINDLE TREE COURT  
 City WOODBRIDGE State VA Zip Code 22193-6026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BOOZ ALLEN HAMILTON Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06819**  
 Amount of Each Receipt this Period  
 105.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1105.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2378 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. THOMAS P. WATSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 136 E. AVENUE

City CORONADO	State CA	Zip Code 92118-1321
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06820**

Amount of Each Receipt this Period  
 201.00

**B. WILLIAM WATSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 608 PRISCILLA

City DESOTO	State TX	Zip Code 75115-5521
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ME	Occupation MANAGER
------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06821**

Amount of Each Receipt this Period  
 250.00

**C. MR. LINDSAY F. WATTON JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 509 HUNTERS LANE

City ORELAND	State PA	Zip Code 19075-2339
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06822**

Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	511.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2379 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GALEN WEABER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 810 HOLLY LANE  
 City LEBANON State PA Zip Code 17042-9028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF - EMPLOYED Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06823**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. JOSEPH W. WEAVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 LEDGEMONT DRIVE  
 City WARWICK State RI Zip Code 02886-4224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer F.M. GLOBAL Occupation INSURANCE UNDERWRITING MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06824**  
 Amount of Each Receipt this Period  
 275.00

**C. MRS. NANCY S. WEAVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 805 LISADELL DRIVE  
 City KENNETT SQUARE State PA Zip Code 19348-1303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06825**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	575.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2380 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. NANCY S. WEAVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 805 LISADELL DRIVE  
 City KENNETT SQUARE State PA Zip Code 19348-1303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06826**  
 Amount of Each Receipt this Period 40.00

**B. MRS. NANCY S. WEAVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 805 LISADELL DRIVE  
 City KENNETT SQUARE State PA Zip Code 19348-1303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06827**  
 Amount of Each Receipt this Period 50.00

**C. THADDEUS WEAVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3248 ROWLEY ROAD  
 City WILLIAMSTON State MI Zip Code 48895-9532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DOUGLAS J. COMPANIES Occupation HAIRDRESSER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06828**  
 Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 390.00  
**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 2381 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. STELLA WEBB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 230228

City ANCHORAGE	State AK	Zip Code 99523-0228
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation EXECUTIVE
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06829**

Amount of Each Receipt this Period  
 200.00

**B. MR. EDWARD D. WEBER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16 MORGAN HILL DRIVE

City DOYLESTOWN	State PA	Zip Code 18901-2980
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FEC ID number of contributing federal political committee. **C**

Name of Employer TOLL BROTHERS INC.	Occupation BUILDER/DEVELOPER
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06830**

Amount of Each Receipt this Period  
 250.00

**C. MS. LOUISE WEBER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6519 QUINTON LANE

City TUJUNGA	State CA	Zip Code 91042-2833
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI06831**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2382 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT W. WEBSTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 924 18TH STREET S.  
 City ARLINGTON State VA Zip Code 22202-2604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06832**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. TERRY WECKERLY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 145  
 City HURDSFIELD State ND Zip Code 58451-0145  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation FARMER  
 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  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06833**  
 Amount of Each Receipt this Period  
 750.00

**C. MR. SHELBY WEEDA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 42 SHEARWATER  
 City IRVINE State CA Zip Code 92604-4684  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06834**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2383 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID F. WEEKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5611 MILITARY COURT  
 City State Zip Code  
 FAIRFIELD CA 94533-9725  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 R.P.B., INC. C.E.O. ADMINISTRATOR  
 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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06835**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. WAYNE WEEKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 HILLTOP ROAD  
 City State Zip Code  
 MENDHAM NJ 07945-1206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06836**  
 Amount of Each Receipt this Period  
 30.00

**C. MR. WAYNE WEEKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31 HILLTOP ROAD  
 City State Zip Code  
 MENDHAM NJ 07945-1206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06837**  
 Amount of Each Receipt this Period  
 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	360.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2384 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WILLI K.E. WEICHEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1630 HUNTER CIRCLE  
 City WEST CHESTER State PA Zip Code 19380-6659  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06838**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. ROBERT A. WEIGLE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1001 FANNIN ST. SUITE 722  
 City HOUSTON State TX Zip Code 77002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DAVID C. BINTLIFF & CO., INC. Occupation PRESIDENT-CPA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06839**  
 Amount of Each Receipt this Period  
 200.00

**C. TERRI WEINBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5005 ROCKSIDE RD SUITE 1140  
 City CLEVELAND State OH Zip Code 44131-6815  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 18000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06840**  
 Amount of Each Receipt this Period  
 18000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	18500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2385 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT WEINSTEIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18 BIRCH LANE  
 City SHREWSBURY State MA Zip Code 01545-1610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UMASS MEMORIAL HEALTH CARE Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06841**  
 Amount of Each Receipt this Period  
 250.00

**B. MS. CONNIE WEISS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2330 CHESTNUT STREET APARTMENT 22  
 City WEST BEND State WI Zip Code 53095-2987  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06842**  
 Amount of Each Receipt this Period  
 25.00

**C. MR. MARC WEISS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32 W 18TH ST APT 4B  
 City NEW YORK State NY Zip Code 10011-4623  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06843**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 775.00  
**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 2386 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT G. WEISS**  
Full Name (Last, First, Middle Initial)

Mailing Address 16523 ON PAR BLVD.

City State Zip Code  
FORT MYERS FL 33908-2879

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06844**

Amount of Each Receipt this Period  
100.00

**B. MS. BARBARA BARTON WEISZHAAR**  
Full Name (Last, First, Middle Initial)

Mailing Address 4001 ALADDIN DRIVE

City State Zip Code  
PLANO TX 75093-6974

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
H FINANCE - TAX

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
920.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06845**

Amount of Each Receipt this Period  
200.00

**C. MS. BARBARA BARTON WEISZHAAR**  
Full Name (Last, First, Middle Initial)

Mailing Address 4001 ALADDIN DRIVE

City State Zip Code  
PLANO TX 75093-6974

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
H FINANCE - TAX

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
920.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06846**

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 420.00

**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 2387 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CAROL J. WELBORN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5869 N. MISTY RIDGE DRIVE  
 City TUCSON State AZ Zip Code 85718-3434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06847**  
 Amount of Each Receipt this Period  
 300.00

**B. MRS. BARBARA A. WELCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 770 WELSH ROAD APARTMENT 201  
 City HUNTINGDON VALLEY State PA Zip Code 19006-6337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 516.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06848**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. BARBARA A. WELCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 770 WELSH ROAD APARTMENT 201  
 City HUNTINGDON VALLEY State PA Zip Code 19006-6337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 516.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06849**  
 Amount of Each Receipt this Period  
 51.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 401.00  
**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 2388 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. GORDON E. WELCH</b>		Date of Receipt
Mailing Address 435 COUNTRY OAKS P.O. BOX 220927		M M M / D D D / Y Y Y Y Y Y 03 / 18 / 2014
City EL PASO	State TX	Zip Code 79932-3142
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI06850</b>
Name of Employer SELF-EMPLOYED		Amount of Each Receipt this Period
Occupation DEVELOPER		275.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
275.00		

Full Name (Last, First, Middle Initial) <b>B. MR. RICHARD B. WELCH</b>		Date of Receipt
Mailing Address 70 EL CIELITO ROAD		M M M / D D D / Y Y Y Y Y Y 03 / 25 / 2014
City SANTA BARBARA	State CA	Zip Code 93105-2303
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI06851</b>
Name of Employer REQUESTED		Amount of Each Receipt this Period
Occupation REQUESTED		250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
250.00		

Full Name (Last, First, Middle Initial) <b>C. COL. ROBERT E. WELCH</b>		Date of Receipt
Mailing Address 1358 STONE POST ROAD		M M M / D D D / Y Y Y Y Y Y 03 / 25 / 2014
City JAMES ISLAND	State SC	Zip Code 29412-9428
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI06852</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		55.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
211.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	580.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2389 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. COL. ROBERT E. WELCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1358 STONE POST ROAD  
 City JAMES ISLAND State SC Zip Code 29412-9428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 211.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06853**  
 Amount of Each Receipt this Period 1.00

**B. MR. FRANK GIFFORD WELDON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1994 THATCH PALM DR.  
 City BOCA RATON State FL Zip Code 33432-7457  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06854**  
 Amount of Each Receipt this Period 300.00

**C. MR. DONALD E. WELGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 KNOLLWOOD DRIVE  
 City CHESTER State IL Zip Code 62233-1416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer GILOTTER MUNYLOS CORPORATION Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06855**  
 Amount of Each Receipt this Period 15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	316.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2390 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DONALD E. WELGE**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 KNOLLWOOD DRIVE

City CHESTER State IL Zip Code 62233-1416

FEC ID number of contributing federal political committee. **C**

Name of Employer GILOTER MUNYLOS CORPORATION Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI06856**

Amount of Each Receipt this Period  
 25.00

**B. MR. DONALD E. WELGE**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 KNOLLWOOD DRIVE

City CHESTER State IL Zip Code 62233-1416

FEC ID number of contributing federal political committee. **C**

Name of Employer GILOTER MUNYLOS CORPORATION Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06857**

Amount of Each Receipt this Period  
 25.00

**C. MR. DONALD E. WELGE**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 KNOLLWOOD DRIVE

City CHESTER State IL Zip Code 62233-1416

FEC ID number of contributing federal political committee. **C**

Name of Employer GILOTER MUNYLOS CORPORATION Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06858**

Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00

**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 2391 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. JACQUES WELIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6600 RIVER BEND RD  
 City FORT WORTH State TX Zip Code 76132-1120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06859**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. WILLIAM H. WELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1717 NORCOL LANE  
 City CINCINNATI State OH Zip Code 45231-5225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 426.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06860**  
 Amount of Each Receipt this Period  
 75.00

**C. MR. WILLIAM H. WELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1717 NORCOL LANE  
 City CINCINNATI State OH Zip Code 45231-5225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DISABLED Occupation DISABLED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 426.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06861**  
 Amount of Each Receipt this Period  
 76.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 651.00  
**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 2392 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. WILLIAM H. WELLER**

Mailing Address 1717 NORCOL LANE

City State Zip Code  
CINCINNATI OH 45231-5225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
DISABLED DISABLED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
426.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06862**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. MR. THOMAS J. WELLING**

Mailing Address 4 ORCHARD PLACE

City State Zip Code  
BRONXVILLE NY 10708-2510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06863**

Amount of Each Receipt this Period  
220.00

Full Name (Last, First, Middle Initial)  
**C. MR. EARL D. WELLMAN**

Mailing Address 3550 ROBINA AVENUE

City State Zip Code  
BERKLEY MI 48072-1406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06864**

Amount of Each Receipt this Period  
221.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 541.00

**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 2393 OF 2949
	<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CAROL D. WELLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 BERKLEY LANE  
 City SAINT LOUIS State MO Zip Code 63124-2001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **03 / 07 / 2014**  
**Transaction ID : 2014M04L11AI06865**  
 Amount of Each Receipt this Period: **100.00**

**B. MRS. CAROL D. WELLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 BERKLEY LANE  
 City SAINT LOUIS State MO Zip Code 63124-2001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **03 / 21 / 2014**  
**Transaction ID : 2014M04L11AI06866**  
 Amount of Each Receipt this Period: **500.00**

**C. MRS. CAROL D. WELLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 BERKLEY LANE  
 City SAINT LOUIS State MO Zip Code 63124-2001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt: **03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI06867**  
 Amount of Each Receipt this Period: **500.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2394 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LAVERNE W. WELLS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2012 GARST CIRCLE

City BOONE State IA Zip Code 50036-4450

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 356.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06868**

Amount of Each Receipt this Period  
 1.00

**B. MR. CARL JOHN WELSH**  
Full Name (Last, First, Middle Initial)

Mailing Address 6531 E. RAFTRIVER STREET

City MESA State AZ Zip Code 85215-9769

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06869**

Amount of Each Receipt this Period  
 100.00

**C. MR. CARL JOHN WELSH**  
Full Name (Last, First, Middle Initial)

Mailing Address 6531 E. RAFTRIVER STREET

City MESA State AZ Zip Code 85215-9769

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06870**

Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 221.00

**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 2395 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. TEXAS M. WELSH**  
Full Name (Last, First, Middle Initial)

Mailing Address 720 W. 6TH ST

City HOUSTON State TX Zip Code 77007-2423

FEC ID number of contributing federal political committee. **C**

Name of Employer ROADRUNNER ARCHIVES Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06871**

Amount of Each Receipt this Period  
 450.00

**B. MRS. DYANNE WELTE**  
Full Name (Last, First, Middle Initial)

Mailing Address 28700 HOPE CIR

City EASTON State MD Zip Code 21601-8433

FEC ID number of contributing federal political committee. **C**

Name of Employer RANDOM BALL DESIGN Occupation SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06872**

Amount of Each Receipt this Period  
 250.00

**C. MR. THOMAS WELTE**  
Full Name (Last, First, Middle Initial)

Mailing Address 13360 CHAMBORD ST.

City BROOKSVILLE State FL Zip Code 34613-6812

FEC ID number of contributing federal political committee. **C**

Name of Employer RUSCO, INC. Occupation OWNER

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  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06873**

Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2396 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SALLY S. WENAAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 5910 E. WEST MIRAMAR DRIVE

City TUCSON State AZ Zip Code 85715-3024

FEC ID number of contributing federal political committee. **C**

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 11 / 2014**

**Transaction ID : 2014M04L11AI06874**

Amount of Each Receipt this Period  
**450.00**

**B. DR. JAMES R. WENDELKEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 6420 OUTABOUNDS COURT

City OKLAHOMA CITY State OK Zip Code 73116-5100

FEC ID number of contributing federal political committee. **C**

Name of Employer: **MIDWEST ONCOLOGY GROUP** Occupation: **PHYSICIAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **621.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 10 / 2014**

**Transaction ID : 2014M04L11AI06875**

Amount of Each Receipt this Period  
**120.00**

**C. DR. JAMES R. WENDELKEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 6420 OUTABOUNDS COURT

City OKLAHOMA CITY State OK Zip Code 73116-5100

FEC ID number of contributing federal political committee. **C**

Name of Employer: **MIDWEST ONCOLOGY GROUP** Occupation: **PHYSICIAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **621.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 19 / 2014**

**Transaction ID : 2014M04L11AI06876**

Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>820.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2397 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. JAMES R. WENDELKEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6420 OUTABOUNDS COURT  
 City State Zip Code  
 OKLAHOMA CITY OK 73116-5100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MIDWEST ONCOLOGY GROUP PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 621.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06877**  
 Amount of Each Receipt this Period  
 1.00

**B. MRS. LUCILLE M. WENDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 788  
 City State Zip Code  
 MEDICAL LAKE WA 99022-0788  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 278.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06878**  
 Amount of Each Receipt this Period  
 18.00

**C. MR. JAMES M. WENGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 825 CAMINO ANGLADA  
 City State Zip Code  
 TAOS NM 87571-6648  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06879**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 269.00  
**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 2398 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOSEPH J. WENT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9204 KRISTIN LANE  
 City State Zip Code  
 FAIRFAX VA 22032-1809  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06880**  
 Amount of Each Receipt this Period  
 220.00

**B. MRS. ARTHUR G. WENTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2560 GLENWOOD DRIVE  
 City State Zip Code  
 WEXFORD PA 15090-7938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06881**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. ROBIN WERBER ARMANDPUR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2205 BEVERLY GLEN PLACE  
 City State Zip Code  
 LOS ANGELES CA 90077-2505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06882**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 520.00  
**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 2399 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. FLOYD L. WERGELAND JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3425 MALPAZO COURT  
 City BONITA State CA Zip Code 91902-1221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06883**  
 Amount of Each Receipt this Period  
 100.00

**B. MISS MARILYN S. WERKEMA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 465 JENNILEAH LANE  
 City SAN MARCOS State CA Zip Code 92069-1131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06884**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. EVON M. WERNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 807  
 City RANCHO SANTA FE State CA Zip Code 92067-0807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06885**  
 Amount of Each Receipt this Period  
 206.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	556.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2400 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD D. WERNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15827 LEAVENWORTH STREET  
 City OMAHA State NE Zip Code 68118-2177  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06886**  
 Amount of Each Receipt this Period 155.00

**B. MRS. EDITH W. WERTHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8339 VINTAGE CLUB CIRCLE  
 City WILMINGTON State NC Zip Code 28411-7690  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06887**  
 Amount of Each Receipt this Period 100.00

**C. MRS. EDITH W. WERTHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8339 VINTAGE CLUB CIRCLE  
 City WILMINGTON State NC Zip Code 28411-7690  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06888**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 755.00  
**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 2401 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARGARET H. WEST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1514 MARIA PLACE  
 City CORONADO State CA Zip Code 92118-2614  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **241.00**

Date of Receipt: **03 / 25 / 2014**  
**Transaction ID : 2014M04L11AI06889**  
 Amount of Each Receipt this Period: **21.00**

**B. OLIVIA WEST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23403 HOLLY HOLLOW ST  
 City TOMBALL State TX Zip Code 77377-3686  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **STUDENT** Occupation: **STUDENT**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **03 / 26 / 2014**  
**Transaction ID : 2014M04L11AI06890**  
 Amount of Each Receipt this Period: **300.00**

**C. MR. RICHARD M. WEST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2087 BRIARWOOD DR.  
 City LAUREL State MS Zip Code 39440-2117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **WEST QUALITY FOOD SVC.,INC.** Occupation: **PRESIDENT**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **03 / 07 / 2014**  
**Transaction ID : 2014M04L11AI06891**  
 Amount of Each Receipt this Period: **200.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>521.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2402 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. RICHARD M. WEST</b>		Date of Receipt
Mailing Address 2087 BRIARWOOD DR.		M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014
City	State	Zip Code
LAUREL	MS	39440-2117
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI06892
C		Amount of Each Receipt this Period
		100.00
Name of Employer	Occupation	
WEST QUALITY FOOD SVC.,INC.	PRESIDENT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	300.00	

Full Name (Last, First, Middle Initial) <b>B. MS. SUE WEST</b>		Date of Receipt
Mailing Address P.O. BOX 338		M M M / D D D / Y Y Y Y Y Y 03 / 20 / 2014
City	State	Zip Code
MURPHY	NC	28906-0338
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI06893
C		Amount of Each Receipt this Period
		250.00
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	250.00	

Full Name (Last, First, Middle Initial) <b>C. MR. ROBERT E. WESTERVELT</b>		Date of Receipt
Mailing Address 8644 BLACKWOLF DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2014
City	State	Zip Code
MADISON	WI	53717-2139
FEC ID number of contributing federal political committee.		Transaction ID : 2014M04L11AI06894
C		Amount of Each Receipt this Period
		101.00
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	201.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	451.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2403 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RONALD WESTERVELT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4928 VIEJO CT.  
 City GRANBURY State TX Zip Code 76049-7103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation CIVIL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06895**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. ERNEST P. WESTMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2165 MONTCLAIR STREET  
 City SAN DIEGO State CA Zip Code 92104-5340  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06896**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. ERNEST P. WESTMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2165 MONTCLAIR STREET  
 City SAN DIEGO State CA Zip Code 92104-5340  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06897**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 470.00  
**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 2404 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD B. WESTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3025 CHESBROUGH BLVD.  
 APARTMENT 325  
 City ROCK HILL State SC Zip Code 29732-5539  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06898**  
 Amount of Each Receipt this Period  
 150.00

**B. MR. TIMOTHY WESTOVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6548 N. TURNBERRY DRIVE  
 City TUCSON State AZ Zip Code 85718-2600  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06899**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. JAMES FRED WESTPHALEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7605 BROOKVIEW DRIVE  
 City FRISCO State TX Zip Code 75034-5421  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06900**  
 Amount of Each Receipt this Period  
 115.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	315.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2405 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LOTTIE T. WETZEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6426 RIGGS PLACE  
 City State Zip Code  
 LOS ANGELES CA 90045-1242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 562.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06901**  
 Amount of Each Receipt this Period  
 390.00

**B. MRS. LOTTIE T. WETZEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6426 RIGGS PLACE  
 City State Zip Code  
 LOS ANGELES CA 90045-1242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 562.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06902**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. LOTTIE T. WETZEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6426 RIGGS PLACE  
 City State Zip Code  
 LOS ANGELES CA 90045-1242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 562.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06903**  
 Amount of Each Receipt this Period  
 122.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 562.00  
**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 2406 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MORRIS WEXLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10711 POT SPRING ROAD  
 City COCKEYSVILLE State MD Zip Code 21030-3019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ATLANTIC SECURITIES Occupation STOCK BROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06904**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. EARL E. WHALEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5220 MANZ PLACE APARTMENT 242  
 City SARASOTA State FL Zip Code 34232-2683  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06905**  
 Amount of Each Receipt this Period  
 1.00

**C. MRS. THOMAS L. WHALEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 217 PITTS AVENUE  
 City MARSHALL State TX Zip Code 75672-4719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06906**  
 Amount of Each Receipt this Period  
 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	221.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2407 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. NORA WHEELER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3519 SHADY BLUFF DRIVE  
 City LARGO State FL Zip Code 33770-4518  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06907**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. RALPH M. WHEELER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 659 GIFFORD AVENUE  
 City AMERICAN FALLS State ID Zip Code 83211-1315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06908**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. ROBERT E. WHEELock**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3451 PARKLAWN AVENUE  
 APARTMENT 307  
 City EDINA State MN Zip Code 55435-5103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 309.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06909**  
 Amount of Each Receipt this Period  
 254.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	505.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2408 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT M. WHITAKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2612 SEDGEFIELD PLACE

City MOBILE	State AL	Zip Code 36693-3073
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	11	/	2014

**Transaction ID : 2014M04L11AI06910**

Amount of Each Receipt this Period  
50.00

**B. MR. ROBERT M. WHITAKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2612 SEDGEFIELD PLACE

City MOBILE	State AL	Zip Code 36693-3073
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	17	/	2014

**Transaction ID : 2014M04L11AI06911**

Amount of Each Receipt this Period  
55.00

**C. MR. ROBERT M. WHITAKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2612 SEDGEFIELD PLACE

City MOBILE	State AL	Zip Code 36693-3073
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
301.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI06912**

Amount of Each Receipt this Period  
56.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	161.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2409 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. WILLIAM G. WHITAKER III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4430 DAVIDSON AVENUE  
 City ATLANTA State GA Zip Code 30319-1128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06913**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. IAN A. WHITE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9095 HIGH BANKS DRIVE  
 City EASTON State MD Zip Code 21601-6833  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06914**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. JAMES WHITE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2924 SAINT ANDREWS LANE  
 City CHARLOTTE State NC Zip Code 28205-3737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 511.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06915**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 320.00  
**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 2410 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JAMES WHITE**  
Full Name (Last, First, Middle Initial)

Mailing Address 2924 SAINT ANDREWS LANE

City CHARLOTTE State NC Zip Code 28205-3737

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 511.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06916**

Amount of Each Receipt this Period  
 120.00

**B. MRS. JAMES WHITE**  
Full Name (Last, First, Middle Initial)

Mailing Address 2924 SAINT ANDREWS LANE

City CHARLOTTE State NC Zip Code 28205-3737

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 511.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06917**

Amount of Each Receipt this Period  
 1.00

**C. MRS. MARTHA WHITE**  
Full Name (Last, First, Middle Initial)

Mailing Address W8828 JASON DRIVE

City BEAVER DAM State WI Zip Code 53916-9787

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06918**

Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 122.00

**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 2411 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT WHITE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3202 LAUREL POINT COURT  
 City KINGWOOD State TX Zip Code 77339-3634  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HARVEST PIPELINE COMPANY Occupation BUSINESS DEVELOPMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06919**  
 Amount of Each Receipt this Period  
 400.00

**B. MR. ROBERT G. WHITE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 865 CENTRAL AVENUE  
 City NEEDHAM State MA Zip Code 02492-1316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06920**  
 Amount of Each Receipt this Period  
 200.00

**C. MS. SUSAN J. WHITE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1465 MID BROADWELL RD #4301  
 City ALHARETTA State GA Zip Code 30004-1194  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06921**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2412 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SUSAN J. WHITE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1465 MID BROADWELL RD #4301  
 City ALHARETTA State GA Zip Code 30004-1194  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation NONE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06922**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. JOHN T. WHITEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2607 GREYSTONE ROAD  
 City HENDERSON State NV Zip Code 89074-3345  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EPSILON SYSTEMS SOLUTIONS INC. Occupation SENIOR TRAINING SPECIALIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06923**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. JOHN T. WHITEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2607 GREYSTONE ROAD  
 City HENDERSON State NV Zip Code 89074-3345  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EPSILON SYSTEMS SOLUTIONS INC. Occupation SENIOR TRAINING SPECIALIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06924**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2413 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. SPOOK WHITENER</b>		Date of Receipt
Mailing Address 11764 N. FARM ROAD 177		M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2014
City	State	Zip Code
FAIR GROVE	MO	65648-8649
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI06925</b>
Name of Employer TRAILINER CORPORATION		Amount of Each Receipt this Period
Occupation C.E.O.		250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	250.00	

Full Name (Last, First, Middle Initial) <b>B. LADY KAREN CHERYL WHITES</b>		Date of Receipt
Mailing Address R.R. 1 BOX 950		M M M / D D D / Y Y Y Y Y Y 03 / 04 / 2014
City	State	Zip Code
EUBANK	KY	42567
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI06925</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	230.00	

Full Name (Last, First, Middle Initial) <b>C. MS. GENEVA S. WHITLOW</b>		Date of Receipt
Mailing Address 507 W. OAK DRIVE		M M M / D D D / Y Y Y Y Y Y 03 / 04 / 2014
City	State	Zip Code
ROUND ROCK	TX	78664-3028
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2014M04L11AI06927</b>
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation RETIRED		35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	256.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	335.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2414 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. GENEVA S. WHITLOW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 507 W. OAK DRIVE  
 City ROUND ROCK State TX Zip Code 78664-3028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06928**  
 Amount of Each Receipt this Period  
 30.00

**B. MS. GENEVA S. WHITLOW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 507 W. OAK DRIVE  
 City ROUND ROCK State TX Zip Code 78664-3028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06929**  
 Amount of Each Receipt this Period  
 31.00

**C. MR. MICHAEL R. WHITMER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2553 BLEVIN ROAD  
 City YUBA CITY State CA Zip Code 95993-1412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PLUMBING CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06930**  
 Amount of Each Receipt this Period  
 165.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 226.00  
**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 2415 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LUTHER E. WHITT JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1668 HIGHWAY 15 S.  
 City WOODLAND State MS Zip Code 39776-9705  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06931**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. DONALD WHITTINGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 123 VISTA ROAD  
 City CHEHALIS State WA Zip Code 98532-8703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 506.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06932**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. DONALD WHITTINGTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 123 VISTA ROAD  
 City CHEHALIS State WA Zip Code 98532-8703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 506.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06933**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 301.00  
**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 2416 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JANICE WHITTINGTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 36 BELMONT OAKS DRIVE

City TALMO State GA Zip Code 30575-1542

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06934**

Amount of Each Receipt this Period  
 50.00

**B. MRS. JANICE WHITTINGTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 36 BELMONT OAKS DRIVE

City TALMO State GA Zip Code 30575-1542

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06935**

Amount of Each Receipt this Period  
 50.00

**C. MRS. HOPE N. WHYMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 409 LONG COVE DRIVE

City MC KINNEY State TX Zip Code 75069-1957

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06936**

Amount of Each Receipt this Period  
 2.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 102.00

**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 2417 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. R. SCOTT WHYTE**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 394

City GOLDFIELD	State IA	Zip Code 50542-0394
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06937**

Amount of Each Receipt this Period  
250.00

**B. MR. R. SCOTT WHYTE**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 394

City GOLDFIELD	State IA	Zip Code 50542-0394
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06938**

Amount of Each Receipt this Period  
1.00

**C. MS. LINDA MARIE WIATER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2724 N. 99TH STREET

City OMAHA	State NE	Zip Code 68134-5561
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06939**

Amount of Each Receipt this Period  
251.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	502.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2418 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT K. WICHMANN**  
Full Name (Last, First, Middle Initial)

Mailing Address 326 BAMBERG DRIVE

City BLUFFTON State SC Zip Code 29910-4898

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 601.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06940**

Amount of Each Receipt this Period  
 201.00

**B. MS. MARGARET WICHSER**  
Full Name (Last, First, Middle Initial)

Mailing Address 115 W. RAND ROAD

City VILLA PARK State IL Zip Code 60181-3152

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06941**

Amount of Each Receipt this Period  
 1.00

**C. MR. ROBERT WICKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 10824 PAGERWOOD DRIVE

City DALLAS State TX Zip Code 75230-4468

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06942**

Amount of Each Receipt this Period  
 111.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	313.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2419 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MS. K. JANET WIECHMAN</b>		Date of Receipt
Mailing Address P.O. BOX 9169		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
HUNTSVILLE	TX	77340-0020
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI06943</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="120.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="790.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MS. K. JANET WIECHMAN</b>		Date of Receipt
Mailing Address P.O. BOX 9169		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
HUNTSVILLE	TX	77340-0020
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI06944</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="790.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MS. K. JANET WIECHMAN</b>		Date of Receipt
Mailing Address P.O. BOX 9169		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City	State	Zip Code
HUNTSVILLE	TX	77340-0020
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI06945</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="790.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="670.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 2420 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LIGIA I. WIEGAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3802 N.E. 207TH STREET  
 APARTMENT 901  
 City AVENTURA State FL Zip Code 33180-3851  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **451.00**

Date of Receipt: **03 / 28 / 2014**  
**Transaction ID : 2014M04L11AI06946**  
 Amount of Each Receipt this Period: **251.00**

**B. MR. SAMUEL J. WIEGAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6584 CHAMPETRE COURT  
 City RENO State NV Zip Code 89511-5077  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **RETIRED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **500.00**

Date of Receipt: **03 / 21 / 2014**  
**Transaction ID : 2014M04L11AI06947**  
 Amount of Each Receipt this Period: **500.00**

**C. MR. GORDON WIEGARDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1423 N. 8TH STREET  
 City SEWARD State NE Zip Code 68434-1001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: **RETIRED** Occupation: **ENGINEER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt: **03 / 20 / 2014**  
**Transaction ID : 2014M04L11AI06948**  
 Amount of Each Receipt this Period: **100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **851.00**  
**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 2421 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES F. WIEHL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 66 FOOTHILL CT  
 City HARPERS FERRY State WV Zip Code 25425-4951  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KNOWLEDGE CONSULTING GROOUP Occupation IT SECURITY CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06949**  
 Amount of Each Receipt this Period  
 100.00

**B. MRS. JANE F. WIELAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1800 RIVIERA LANE  
 City O FALLON State IL Zip Code 62269-6696  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06950**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. PAUL D. WIESEHUEGEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N79W28417A WOODREST DRIVE  
 City HARTLAND State WI Zip Code 53029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer OTIS ELEVATOR COMPANY Occupation UNION ELEVATOR CONSTRUCTION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06951**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 320.00  
**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 2422 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PAUL D. WIESEHUEGEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N79W28417A WOODREST DRIVE  
 City HARTLAND State WI Zip Code 53029  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer OTIS ELEVATOR COMPANY Occupation UNION ELEVATOR CONSTRUCTION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06952**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. CHARLES WIESEPAPE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2015 FOREST GARDEN DRIVE  
 City HUMBLE State TX Zip Code 77345-1626  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HUFCO Occupation CHAIRMAN & C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06953**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. CHARLES WIESEPAPE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2015 FOREST GARDEN DRIVE  
 City HUMBLE State TX Zip Code 77345-1626  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HUFCO Occupation CHAIRMAN & C.E.O.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06954**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 501.00  
**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 2423 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. LEAH M. WIGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1701 PHELPS ST.

City COLUMBIA State SC Zip Code 29205-2947

FEC ID number of contributing federal political committee. **C**

Name of Employer US ARMY Occupation DENTIST

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  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06955**

Amount of Each Receipt this Period  
 50.00

**B. DR. LEAH M. WIGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1701 PHELPS ST.

City COLUMBIA State SC Zip Code 29205-2947

FEC ID number of contributing federal political committee. **C**

Name of Employer US ARMY Occupation DENTIST

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  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06956**

Amount of Each Receipt this Period  
 50.00

**C. DR. LEAH M. WIGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1701 PHELPS ST.

City COLUMBIA State SC Zip Code 29205-2947

FEC ID number of contributing federal political committee. **C**

Name of Employer US ARMY Occupation DENTIST

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  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06957**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00

**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 2424 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. LEAH M. WIGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1701 PHELPS ST.

City COLUMBIA State SC Zip Code 29205-2947

FEC ID number of contributing federal political committee. **C**

Name of Employer US ARMY Occupation DENTIST

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  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06958**

Amount of Each Receipt this Period  
 50.00

**B. MS. JULIA WILBERT**  
Full Name (Last, First, Middle Initial)

Mailing Address 3769 GREENVIEW DRIVE

City EL DORADO HILLS State CA Zip Code 95762-5217

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CONTRACTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06959**

Amount of Each Receipt this Period  
 250.00

**C. MR. ROLAND W. WILBUR**  
Full Name (Last, First, Middle Initial)

Mailing Address 185 PINE HAVEN SHORES ROAD  
APARTMENT 303

City SHELBURNE State VT Zip Code 05482-7810

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06960**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2425 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROLAND W. WILBUR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 185 PINE HAVEN SHORES ROAD  
 APARTMENT 303  
 City SHELBURNE State VT Zip Code 05482-7810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06961**  
 Amount of Each Receipt this Period  
 101.00

**B. MR. ARTHUR S. WILDMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 W. MAIN  
 City MARTINSVILLE State NJ Zip Code 08836  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06962**  
 Amount of Each Receipt this Period  
 500.00

**C. MR. RAYMOND G. WILE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2106 HORNES LAKE ROAD  
 City WILLIAMSBURG State VA Zip Code 23185-7510  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 432.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06963**  
 Amount of Each Receipt this Period  
 112.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 713.00  
**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 2426 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD L. WILKEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 5112 N. HIGHWAY 83

City HARTLAND State WI Zip Code 53029-9306

FEC ID number of contributing federal political committee. **C**

Name of Employer FISHER BARTON INC. Occupation C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06964**

Amount of Each Receipt this Period  
 32300.00

**B. MRS. SUSAN WILKEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 5112 STATE ROAD 83

City HARTLAND State WI Zip Code 53029-9306

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI06965**

Amount of Each Receipt this Period  
 32300.00

**C. MS. VIRGINIA E. WILKIE**  
Full Name (Last, First, Middle Initial)

Mailing Address 3737 CASTELLON COURT

City SARASOTA State FL Zip Code 34238-4592

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06966**

Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	64800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2427 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. VIRGINIA E. WILKIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3737 CASTELLON COURT

City SARASOTA	State FL	Zip Code 34238-4592
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06967**

Amount of Each Receipt this Period  
 50.00

**B. MS. VIRGINIA E. WILKIE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3737 CASTELLON COURT

City SARASOTA	State FL	Zip Code 34238-4592
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI06968**

Amount of Each Receipt this Period  
 25.00

**C. MRS. ROSE T. WILKINS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 124 LAKE MURRAY COURT

City LEXINGTON	State SC	Zip Code 29072-9104
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI06969**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2428 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENT WILKINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 114 MORGANS CIRCLE  
 City SAN ANTONIO State TX Zip Code 78216-8506  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06970**  
 Amount of Each Receipt this Period  
 250.00

**B. MR. MICHAEL WILKINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 SOUTHAMPTON RD # 47  
 City BENICIA State CA Zip Code 94510-1843  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI06971**  
 Amount of Each Receipt this Period  
 25.00

**C. MR. MICHAEL WILKINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 SOUTHAMPTON RD # 47  
 City BENICIA State CA Zip Code 94510-1843  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06972**  
 Amount of Each Receipt this Period  
 25.00

**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 2429 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL WILKINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 900 SOUTHAMPTON RD # 47  
 City BENICIA State CA Zip Code 94510-1843  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer N/A Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06973**  
 Amount of Each Receipt this Period 50.00

**B. MR. SCOTT WILKINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18323 SONTERRA PLACE  
 City SAN ANTONIO State TX Zip Code 78258-4353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI06974**  
 Amount of Each Receipt this Period 120.00

**C. MR. SCOTT WILKINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18323 SONTERRA PLACE  
 City SAN ANTONIO State TX Zip Code 78258-4353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06975**  
 Amount of Each Receipt this Period 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	290.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2430 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SCOTT WILKINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18323 SONTERRA PLACE  
 City SAN ANTONIO State TX Zip Code 78258-4353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06976**  
 Amount of Each Receipt this Period 1.00

**B. MR. WILLIAM W. WILKINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3336 TOPSFIELD ROAD  
 City SOUTH BEND State IN Zip Code 46614-2357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06977**  
 Amount of Each Receipt this Period 1.00

**C. MR. HOWARD WILL JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N9242 S. SHORE DRIVE  
 City EAST TROY State WI Zip Code 53120-2178  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI06978**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 252.00  
**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 2431 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. HOWARD WILL JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address N9242 S. SHORE DRIVE

City EAST TROY State WI Zip Code 53120-2178

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI06979**

Amount of Each Receipt this Period  
 250.00

**B. MR. JAMES WILL**  
Full Name (Last, First, Middle Initial)

Mailing Address 2707 GARFIELD ROAD

City TACOMA State WA Zip Code 98403-2919

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI06980**

Amount of Each Receipt this Period  
 100.00

**C. MR. ELMER WILLENBRING**  
Full Name (Last, First, Middle Initial)

Mailing Address 205 WOODCREST DRIVE

City BURNSVILLE State MN Zip Code 55337-2763

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06981**

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2432 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ELMER WILLENBRING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 205 WOODCREST DRIVE  
 City BURNSVILLE State MN Zip Code 55337-2763  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06982**  
 Amount of Each Receipt this Period 1.00

**B. MRS. ADELE C. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6341 E. PLAYER CIRCLE  
 City MESA State AZ Zip Code 85215-1592  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06983**  
 Amount of Each Receipt this Period 1.00

**C. MR. BIVINS H. WILLIAMS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13810 BALMORE CIRCLE  
 City HOUSTON State TX Zip Code 77069-1902  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI06984**  
 Amount of Each Receipt this Period 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	102.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2433 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. C. WEBB WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1211 MEADOW RIDGE

City REDDING State CT Zip Code 06896-3221

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06985**

Amount of Each Receipt this Period  
 250.00

**B. MR. C. WEBB WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1211 MEADOW RIDGE

City REDDING State CT Zip Code 06896-3221

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI06986**

Amount of Each Receipt this Period  
 1.00

**C. DR. CHARLES H. WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1000 LAKELAND SQUARE  
SUITE 800

City FLOWOOD State MS Zip Code 39232-7649

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

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  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI06987**

Amount of Each Receipt this Period  
 750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1001.00

**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 2434 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. CLIFF WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 7340

City FORT MYERS State FL Zip Code 33919-0340

FEC ID number of contributing federal political committee. **C**

Name of Employer DIRTY DEEDS, LTD. Occupation MUSICIAN

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  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI06988**

Amount of Each Receipt this Period  
 300.00

**B. MS. CONNIE D. WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address 7265 E. LAS PALMARITAS DRIVE

City SCOTTSDALE State AZ Zip Code 85258-2756

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06989**

Amount of Each Receipt this Period  
 1000.00

**C. MR. DANIEL WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address 300 ROUND HILL DRIVE

City FREEHOLD State NJ Zip Code 07728-8211

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI06990**

Amount of Each Receipt this Period  
 310.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1610.00

**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 2435 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DAVID E. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5122 N. STATE ROAD 39  
 City LAPORTE State IN Zip Code 46350  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer A. & A. METAL Occupation BUSINESS MANAGER  
 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  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI06991**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. DONALD H. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1180 SECRET LAKE LOOP  
 City LINCOLN State CA Zip Code 95648-8405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI06992**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. DOW WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8321 GALLERY LANE  
 City ARLINGTON State WA Zip Code 98223-5085  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI06993**  
 Amount of Each Receipt this Period  
 60.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	610.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2436 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWIN F. WILLIAMS III**  
Full Name (Last, First, Middle Initial)

Mailing Address 1072 TROY SCHENECTADY ROAD

City LATHAM State NY Zip Code 12110-1025

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
03 / 24 / 2014  
Transaction ID : 2014M04L11AI06994

Amount of Each Receipt this Period  
470.00

**B. MR. GERALD WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1913 N. TRENTON STREET

City RUSTON State LA Zip Code 71270-2646

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
03 / 31 / 2014  
Transaction ID : 2014M04L11AI06995

Amount of Each Receipt this Period  
201.00

**C. MR. JIM E. WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 1688

City PASCAGOULA State MS Zip Code 39568-1688

FEC ID number of contributing federal political committee. **C**

Name of Employer LOCKARD & WILLIAMS INSURANCE SERVICE Occupation INSURANCE ADMINISTRATION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
03 / 14 / 2014  
Transaction ID : 2014M04L11AI06996

Amount of Each Receipt this Period  
350.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1021.00

**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 2437 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JOAN S. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 150 LAKEVIEW COURT  
 City FOUR SEASONS State MO Zip Code 65049-6609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI06997**  
 Amount of Each Receipt this Period  
 260.00

**B. MR. KENDRALL LEE WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5645 NORTH JULIANO ROAD  
 City LAS VEGAS State NV Zip Code 89149-3907  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI06998**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. KENDRALL LEE WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5645 NORTH JULIANO ROAD  
 City LAS VEGAS State NV Zip Code 89149-3907  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI06999**  
 Amount of Each Receipt this Period  
 121.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 501.00  
**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 2438 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENNETH WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21 PINE RIDGE  
 City MAGNOLIA State AR Zip Code 71753-2277  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MAGNOLIA COCA-COLA BOTTLING CORP. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07000**  
 Amount of Each Receipt this Period  
 500.00

**B. MR. L. THOMAS WILLIAMS JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2020 BRUCK STREET  
 City COLUMBUS State OH Zip Code 43207-2329  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FRANKLIN INTERNATIONAL Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07001**  
 Amount of Each Receipt this Period  
 5000.00

**C. MS. LAURA WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 591 SAND POINT RD  
 City CARPINTERIA State CA Zip Code 93013-1101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer S.T.W. FIXED INCOME MANAGEMENT Occupation VICE PRESIDENT CLIENT SERVICES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI07002**  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6500.00  
**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 2439 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LOYE WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1120  
 City SOMIS State CA Zip Code 93066-1120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07003**  
 Amount of Each Receipt this Period  
 1000.00

**B. MS. MARTHA V. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6722 N. COUNTRY CLUB DRIVE  
 City OKLAHOMA CITY State OK Zip Code 73116-4706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI07004**  
 Amount of Each Receipt this Period  
 120.00

**C. MRS. MARY M. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 N. 48TH AVENUE APARTMENT 40  
 City YAKIMA State WA Zip Code 98908-3180  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI07005**  
 Amount of Each Receipt this Period  
 65.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1185.00  
**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 2440 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL R. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6507 ROXTON DRIVE  
 City AMARILLO State TX Zip Code 79109-5120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI07006**  
 Amount of Each Receipt this Period  
 50.00

**B. DR. PATRICK C. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 665  
 City DICKINSON State ND Zip Code 58602-0665  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI07007**  
 Amount of Each Receipt this Period  
 245.00

**C. MR. PHILLIP BLAIR WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3009 PLUMB STREET  
 City HOUSTON State TX Zip Code 77005-3059  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CAMERON INTERNATIONAL Occupation MANAGER  
 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  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI07008**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	595.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2441 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT J. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 167 CORTLAND DRIVE  
 City SADDLE RIVER State NJ Zip Code 07458-2818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KANEBRIDGE CORPORATION Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI07009**  
 Amount of Each Receipt this Period  
 675.00

**B. DR. ROBERT L. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5550 N. YUCCA ROAD  
 City PARADISE VALLEY State AZ Zip Code 85253-5240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07010**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. ROSA C. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 210 COLLINS COURT  
 City COLUMBIA State SC Zip Code 29212-8367  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07011**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1026.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2442 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SHELDON C. WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2504 RED CLOVER COURT

City	State	Zip Code
RESTON	VA	20191-3709

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
M.D.	REMODELING CONTRACTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2014

**Transaction ID : 2014M04L11AI07012**

Amount of Each Receipt this Period  

35.00
-------

**B. MR. SHELDON C. WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2504 RED CLOVER COURT

City	State	Zip Code
RESTON	VA	20191-3709

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
INVESTOR	REMODELING CONTRACTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2014

**Transaction ID : 2014M04L11AI07013**

Amount of Each Receipt this Period  

35.00
-------

**C. MR. STEVEN WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address 20910 VIA CASCO

City	State	Zip Code
YORBA LINDA	CA	92886-7315

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
BOEING	BUSINESS MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L11AI07014**

Amount of Each Receipt this Period  

220.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	290.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2443 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SUSAN E. WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2006 DEERTRAIL STREET

City DEER PARK State TX Zip Code 77536-4355

FEC ID number of contributing federal political committee. **C**

Name of Employer UNIVERSITY OF HOUSTON Occupation ASSOCIATE PROFESSOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI07015**

Amount of Each Receipt this Period  
 500.00

**B. MR. THOMAS G. WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address 252 CREST LAKE DRIVE

City HOOVER State AL Zip Code 35244-3345

FEC ID number of contributing federal political committee. **C**

Name of Employer A.T.&T. Occupation TELCO MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI07016**

Amount of Each Receipt this Period  
 50.00

**C. MR. THOMAS G. WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address 252 CREST LAKE DRIVE

City HOOVER State AL Zip Code 35244-3345

FEC ID number of contributing federal political committee. **C**

Name of Employer A.T.&T. Occupation TELCO MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07017**

Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 551.00

**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 2444 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WALTER E. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 181 PARKVIEW AVENUE  
 City State Zip Code  
 DALY CITY CA 94014-3871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 471.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07018**  
 Amount of Each Receipt this Period  
 30.00

**B. MR. WALTER E. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 181 PARKVIEW AVENUE  
 City State Zip Code  
 DALY CITY CA 94014-3871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 471.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI07019**  
 Amount of Each Receipt this Period  
 25.00

**C. MR. WALTER E. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 181 PARKVIEW AVENUE  
 City State Zip Code  
 DALY CITY CA 94014-3871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 471.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI07020**  
 Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 85.00  
**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 2445 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. WALTER E. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 181 PARKVIEW AVENUE  
 City State Zip Code  
 DALY CITY CA 94014-3871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 471.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI07021**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. WALTER E. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 181 PARKVIEW AVENUE  
 City State Zip Code  
 DALY CITY CA 94014-3871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 471.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI07022**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. WALTER E. WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 181 PARKVIEW AVENUE  
 City State Zip Code  
 DALY CITY CA 94014-3871  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 471.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07023**  
 Amount of Each Receipt this Period  
 45.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 145.00  
**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 2446 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. WALTER E. WILLIAMS**

Mailing Address 181 PARKVIEW AVENUE

City DALY CITY	State CA	Zip Code 94014-3871
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
471.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : 2014M04L11AI07024**

Amount of Each Receipt this Period  
40.00

Full Name (Last, First, Middle Initial)  
**B. MR. WAYNE R. WILLIAMS**

Mailing Address 21209 WALTON RIDGE ROAD

City BRISTOL	State VA	Zip Code 24202-3689
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2014

**Transaction ID : 2014M04L11AI07025**

Amount of Each Receipt this Period  
135.00

Full Name (Last, First, Middle Initial)  
**C. THE HON. CALVIN LUTHER WILLIAMS III**

Mailing Address 150 EMERALD DRIVE

City MILAM	State TX	Zip Code 75959-3378
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SPECTRA ENERGY	Occupation OIL & GAS CONSTRUCTION
------------------------------------	--------------------------------------

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
03	/	31	/	2014

**Transaction ID : 2014M04L11AI07026**

Amount of Each Receipt this Period  
750.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	925.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2447 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. MARJORIE C. WILLIAMSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 351 LITTLE ELK CREEK ROAD  
 City State Zip Code  
 LINCOLN UNIVERSITY PA 19352-9431  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 466.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI07027**  
 Amount of Each Receipt this Period  
 1.00

**B. MR. PETER WILLIAMSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1567 CALLE ALTA  
 City State Zip Code  
 LAJOLLA CA 92037-7104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07028**  
 Amount of Each Receipt this Period  
 1.00

**C. MRS. ROSALIE J. WILLIAMSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6450 36TH LANE  
 City State Zip Code  
 VERO BEACH FL 32966-7812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI07029**  
 Amount of Each Receipt this Period  
 40.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	42.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2448 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ROSALIE J. WILLIAMSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6450 36TH LANE  
 City VERO BEACH State FL Zip Code 32966-7812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI07030**  
 Amount of Each Receipt this Period  
 45.00

**B. MRS. ROSALIE J. WILLIAMSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6450 36TH LANE  
 City VERO BEACH State FL Zip Code 32966-7812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI07031**  
 Amount of Each Receipt this Period  
 45.00

**C. MRS. ROSALIE J. WILLIAMSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6450 36TH LANE  
 City VERO BEACH State FL Zip Code 32966-7812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI07032**  
 Amount of Each Receipt this Period  
 45.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	135.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2449 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ROSALIE J. WILLIAMSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6450 36TH LANE  
 City VERO BEACH State FL Zip Code 32966-7812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 351.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI07033**  
 Amount of Each Receipt this Period 41.00

**B. MR. WILLIAM A. WILLIAMSON III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5607 PURDUE AVENUE  
 City DALLAS State TX Zip Code 75209-4430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF - EMPLOYED Occupation INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07034**  
 Amount of Each Receipt this Period 300.00

**C. MR. JOHN L. WILLIFORD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1500 CHEROKEE HILLS DRIVE  
 City BARTLESVILLE State OK Zip Code 74006-4207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI07035**  
 Amount of Each Receipt this Period 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	342.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2450 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. J. W. WILLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 234 WILLIS ROAD  
 City DERIDDER State LA Zip Code 70634-7523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BODY SHOP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI07036**  
 Amount of Each Receipt this Period  
 35.00

**B. MR. JAMES L. WILLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6947 ALDERTON STREET  
 City REGO PARK State NY Zip Code 11374-5322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 302.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07037**  
 Amount of Each Receipt this Period  
 202.00

**C. MR. OBIE WILLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6136 OBIE WILLIS ROAD  
 City MILTON State FL Zip Code 32570-9225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07038**  
 Amount of Each Receipt this Period  
 201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 438.00  
**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 2451 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MINARD WILLSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 605 SPRING PARK DRIVE  
 City MOUNTAIN HOME State AR Zip Code 72653-2240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI07039**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. MINARD WILLSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 605 SPRING PARK DRIVE  
 City MOUNTAIN HOME State AR Zip Code 72653-2240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI07040**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. MINARD WILLSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 605 SPRING PARK DRIVE  
 City MOUNTAIN HOME State AR Zip Code 72653-2240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI07041**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2452 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ADRIAN C. WILMOT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1400 W BOSTON ROAD

City BROADVIEW HEIGHTS State OH Zip Code 44147-3252

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI07042**

Amount of Each Receipt this Period  
 50.00

**B. MR. ALBERT O. WILSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 29 CONCORD COURT

City BEDFORD State MA Zip Code 01730-2906

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07043**

Amount of Each Receipt this Period  
 120.00

**C. MR. ALEXANDER D. WILSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 5506 ROLAND AVENUE

City BALTIMORE State MD Zip Code 21210-1427

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI07044**

Amount of Each Receipt this Period  
 2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2170.00

**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 2453 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. BETH R. WILSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2720 DALE STREET N.  
APARTMENT 104

City ROSEVILLE State MN Zip Code 55113-2385

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
295.00

Date of Receipt  
03 / 26 / 2014  
**Transaction ID : 2014M04L11AI07045**

Amount of Each Receipt this Period  
55.00

**B. MR. BILL WILSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2802 HERITAGE HILLS COURT

City FORT WORTH State TX Zip Code 76109-5514

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
03 / 13 / 2014  
**Transaction ID : 2014M04L11AI07046**

Amount of Each Receipt this Period  
120.00

**C. MR. BRUCE B. WILSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1600 NORTHSIDE DRIVE N.W.

City ATLANTA State GA Zip Code 30318-3201

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
03 / 26 / 2014  
**Transaction ID : 2014M04L11AI07047**

Amount of Each Receipt this Period  
201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	376.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2454 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CAROL A. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7129 SHENANDOAH DRIVE  
 City INDIAN LAND State SC Zip Code 29707-3533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07048**  
 Amount of Each Receipt this Period  
 75.00

**B. MRS. CAROL A. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7129 SHENANDOAH DRIVE  
 City INDIAN LAND State SC Zip Code 29707-3533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI07049**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. CAROL A. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7129 SHENANDOAH DRIVE  
 City INDIAN LAND State SC Zip Code 29707-3533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07050**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	176.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2455 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. CAROL A. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7129 SHENANDOAH DRIVE  
 City INDIAN LAND State SC Zip Code 29707-3533  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI07051**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. CHARLES B. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6650 BLUE QUARTZ DRIVE  
 City THOMASVILLE State NC Zip Code 27360-8655  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07052**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. CHARLES B. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6650 BLUE QUARTZ DRIVE  
 City THOMASVILLE State NC Zip Code 27360-8655  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI07053**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2456 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. DIANE J. WILSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 47 CR 1220

City State Zip Code  
PITTSBURG TX 75686-6192

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NOT EMPLOYED HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
03 / 21 / 2014  
**Transaction ID : 2014M04L11AI07054**

Amount of Each Receipt this Period  
100.00

**B. MR. DON WILSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 7148 HUNTERS RIDGE DRIVE

City State Zip Code  
DALLAS TX 75248-5206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 17 / 2014  
**Transaction ID : 2014M04L11AI07055**

Amount of Each Receipt this Period  
250.00

**C. MR. FRANCIS WILSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 6118 EDITH BLVD NE UNIT 101

City State Zip Code  
ALBUQUERQUE NM 87107-5085

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11AI07056**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

**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 2457 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GARY L. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31528 VICTORIA POINT ROAD  
 City MALIBU State CA Zip Code 90265-2638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PRIVATE INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI07057**  
 Amount of Each Receipt this Period  
 32400.00

**B. MR. HAROLD R. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 287  
 City HUNT State TX Zip Code 78024-0287  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BANK OF THE HILLS Occupation BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07058**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. JAMES M. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2551 VISTA DR E-302  
 City JUNEAU State AK Zip Code 99801-2057  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI07059**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32820.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2458 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES M. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2551 VISTA DR E-302  
 City JUNEAU State AK Zip Code 99801-2057  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI07060**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. JIMME L. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3815 SPURGIN ROAD  
 City MISSOULA State MT Zip Code 59804-3007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07061**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. JIMME L. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3815 SPURGIN ROAD  
 City MISSOULA State MT Zip Code 59804-3007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07062**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 420.00  
**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 2459 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JO ANNE WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1102 BLENHEIM WAY  
 City BAKERSFIELD State CA Zip Code 93312-5752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 401.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI07063**  
 Amount of Each Receipt this Period  
 201.00

**B. MR. JOHN WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9855 NW 27 TERRACE  
 City DORAL State FL Zip Code 33172-1313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation LAW ENFORCEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI07064**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. JOHN WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9855 NW 27 TERRACE  
 City DORAL State FL Zip Code 33172-1313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation LAW ENFORCEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI07065**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 421.00  
**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 2460 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. KAREN S. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3663 SUMMERWIND CIRCLE  
 City BRADENTON State FL Zip Code 34209-5807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI07066**  
 Amount of Each Receipt this Period  
 300.00

**B. MRS. LUCY REID WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 54 HAVERHILL WAY  
 City SAN ANTONIO State TX Zip Code 78209-8319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI07067**  
 Amount of Each Receipt this Period  
 240.00

**C. MS. LYNNE E. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 319 N. COMMERCIAL STREET  
 City MAYWOOD State NE Zip Code 69038-5135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNIVERSITY OF NEBRASKA Occupation MAINTENANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07068**  
 Amount of Each Receipt this Period  
 35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	575.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2461 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. LYNNE E. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 319 N. COMMERCIAL STREET  
 City MAYWOOD State NE Zip Code 69038-5135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNIVERSITY OF NEBRASKA Occupation MAINTENANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07069**  
 Amount of Each Receipt this Period  
 25.00

**B. MS. LYNNE E. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 319 N. COMMERCIAL STREET  
 City MAYWOOD State NE Zip Code 69038-5135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNIVERSITY OF NEBRASKA Occupation MAINTENANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07070**  
 Amount of Each Receipt this Period  
 25.00

**C. MS. LYNNE E. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 319 N. COMMERCIAL STREET  
 City MAYWOOD State NE Zip Code 69038-5135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNIVERSITY OF NEBRASKA Occupation MAINTENANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07071**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 100.00  
**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 2462 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. LYNNE E. WILSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 319 N. COMMERCIAL STREET

City MAYWOOD State NE Zip Code 69038-5135

FEC ID number of contributing federal political committee. **C**

Name of Employer UNIVERSITY OF NEBRASKA Occupation MAINTENANCE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI0702**

Amount of Each Receipt this Period  
 300.00

**B. MR. MICHAEL WILSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 4736 82ND AVENUE S.E.

City OLYMPIA State WA Zip Code 98501-9685

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 790.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI0703**

Amount of Each Receipt this Period  
 35.00

**C. MR. MICHAEL WILSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 4736 82ND AVENUE S.E.

City OLYMPIA State WA Zip Code 98501-9685

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 790.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI0704**

Amount of Each Receipt this Period  
 680.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 745.00

**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 2463 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MICHAEL WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4736 82ND AVENUE S.E.  
 City OLYMPIA State WA Zip Code 98501-9685  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 790.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI07075**  
 Amount of Each Receipt this Period  
 35.00

**B. MR. RICHARD C. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5351 BROSCHÉ ROAD  
 City ORLANDO State FL Zip Code 32807-1709  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI07076**  
 Amount of Each Receipt this Period  
 300.00

**C. MR. RICHARD D. WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2406 CHANCY STREET  
 City CLINTON State IA Zip Code 52732-6948  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI07077**  
 Amount of Each Receipt this Period  
 440.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 775.00  
**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 2464 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. ROBERT DAVID WILSON</b>		Date of Receipt
Mailing Address 7921 MAUI CIR.		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2014"/>
City	State	Zip Code
PAPILLION	NE	68046-5620
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="120.00"/>

Full Name (Last, First, Middle Initial) <b>B. MR. ROBERT L. WILSON</b>		Date of Receipt
Mailing Address 119 FRIENDFIELD DRIVE		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2014"/>
City	State	Zip Code
FORT MILL	SC	29715-9048
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
RETIRED	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>

Full Name (Last, First, Middle Initial) <b>C. MR. STANLEY WILSON</b>		Date of Receipt
Mailing Address 1311 CRYSTAL LAKE CIRCLE E.		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2014"/>
City	State	Zip Code
PEARLAND	TX	77584-2566
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
C.P. REBAR P.T. INSTALLATION, L.L.C.	CONSTRUCTION OFFICE MANAGER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="265.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="165.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="585.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 2465 OF 2949
	<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. ELSIE K. WINCHESTER</b>		Date of Receipt										
Mailing Address 9290 NICKELS BLVD.		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>18</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	18	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	18	/	2014								
City	State	Zip Code										
BOYNTON BEACH	FL	33436-3149										
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI07081</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
		250.00										
Name of Employer	Occupation											
HOMEMAKER	HOMEMAKER											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	250.00											

Full Name (Last, First, Middle Initial) <b>B. MR. ROY L. WINDSOR</b>		Date of Receipt										
Mailing Address 1109 E. SAINT ANDREWS COURT		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>24</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	24	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	24	/	2014								
City	State	Zip Code										
PEORIA	IL	61614-2215										
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI07082</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
		1.00										
Name of Employer	Occupation											
RETIRED	RETIRED											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	201.00											

Full Name (Last, First, Middle Initial) <b>C. MR. SCOTT WINE</b>		Date of Receipt										
Mailing Address 18515 8TH AVENUE N.		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td>/</td> <td>31</td> <td>/</td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03	/	31	/	2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03	/	31	/	2014								
City	State	Zip Code										
PLYMOUTH	MN	55447-3337										
FEC ID number of contributing federal political committee.		Transaction ID : <b>2014M04L11AI07083</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
		32400.00										
Name of Employer	Occupation											
POLARIS INDUSTRIES, INC.	C.E.O.											
Receipt For:	Aggregate Year-to-Date ▼											
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	32400.00											

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32651.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2466 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MRS. KAETE WINER**

Mailing Address 164 WESTWOOD MANOR

City State Zip Code  
BUTLER PA 16001-1714

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07084**

Amount of Each Receipt this Period  
110.00

Full Name (Last, First, Middle Initial)  
**B. MR. ROBERT A. WINES**

Mailing Address 1218 JEFFERSON STREET

City State Zip Code  
WENATCHEE WA 98801-1931

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
241.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI07085**

Amount of Each Receipt this Period  
121.00

Full Name (Last, First, Middle Initial)  
**C. DR. LEON E. WINGET**

Mailing Address 3405 OAKLAWN STREET  
3405 OAKLAWN

City State Zip Code  
COLUMBUS OH 43224-3452

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI07086**

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 431.00

**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 2467 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RALPH WINKLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5355 BOOMER ROAD  
 City CINCINNATI State OH Zip Code 45247-7926  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI07087**  
 Amount of Each Receipt this Period  
 300.00

**B. MR. RAYMOND W. WINKLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2250 SOUTHWIND BLVD. APARTMENT 225  
 City VERO BEACH State FL Zip Code 32963-4385  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI07088**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. E. EVELYN WINMILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 740 F.M. 473  
 City COMFORT State TX Zip Code 78013-3625  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07089**  
 Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 551.00  
**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 2468 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. MIKE J. WINN**  
Full Name (Last, First, Middle Initial)

Mailing Address 8565 MILBURY ROAD

City SAN DIEGO State CA Zip Code 92129-3365

FEC ID number of contributing federal political committee. **C**

Name of Employer S. U. H. S. D. Occupation TEACHER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07090**

Amount of Each Receipt this Period 25.00

**B. MS. JENNIFER E. WINSTEDT**  
Full Name (Last, First, Middle Initial)

Mailing Address 13296 LEAFCREST LANE APARTMENT 302B

City FAIRFAX State VA Zip Code 22033-4131

FEC ID number of contributing federal political committee. **C**

Name of Employer WINSTEDT COMM. SERVICES INC. Occupation TAX PREPARER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI07091**

Amount of Each Receipt this Period 100.00

**C. MS. JENNIFER E. WINSTEDT**  
Full Name (Last, First, Middle Initial)

Mailing Address 13296 LEAFCREST LANE APARTMENT 302B

City FAIRFAX State VA Zip Code 22033-4131

FEC ID number of contributing federal political committee. **C**

Name of Employer WINSTEDT COMM. SERVICES INC. Occupation TAX PREPARER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI07092**

Amount of Each Receipt this Period 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 155.00

**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 2469 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ARNOLD WINTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 118 N. 7TH AVENUE  
 City SHELTON State IA Zip Code 51201-1235  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 209.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07093**  
 Amount of Each Receipt this Period  
 120.00

**B. DR. THOMAS C. WINTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1018 N. OSPREY COURT  
 City GILBERT State AZ Zip Code 85234-3820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI07094**  
 Amount of Each Receipt this Period  
 250.00

**C. MRS. BETTY WINTERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1382 CRESTWOOD PLACE  
 City CHARLESTON State SC Zip Code 29412-9318  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 236.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07095**  
 Amount of Each Receipt this Period  
 1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	371.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2470 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES WINTERSTEEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27 MYRTLE AVENUE  
 City MILL VALLEY State CA Zip Code 94941-1023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI07096**  
 Amount of Each Receipt this Period  
 5000.00

**B. MR. WINTON E. WISE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1403 MARKS AVENUE  
 City BAY MINETTE State AL Zip Code 36507-5131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI07097**  
 Amount of Each Receipt this Period  
 25.00

**C. MR. WINTON E. WISE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1403 MARKS AVENUE  
 City BAY MINETTE State AL Zip Code 36507-5131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07098**  
 Amount of Each Receipt this Period  
 26.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5051.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2471 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. F. R. WISER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3900 N. MAIN STREET  
 APARTMENT 229  
 City RACINE State WI Zip Code 53402-3678  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07099**  
 Amount of Each Receipt this Period  
 101.00

**B. MS. JOANN F. WITHROW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3372 MONTANA DRIVE  
 City BONITA SPRINGS State FL Zip Code 34134-2662  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07100**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. JON WITHROW**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 316 BROOKFORD SQUARE  
 City NORMAN State OK Zip Code 73072-4725  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SUNDANCE OIL COMPANY Occupation GEOLOGICAL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07101**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	461.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2472 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. BROCK WITIKKO**  
Full Name (Last, First, Middle Initial)

Mailing Address 26 NORTH MAIN ST.  
APT. 6

City MINOT State ND Zip Code 58703-3156

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation LANDMAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
03 / 27 / 2014  
**Transaction ID : 2014M04L11AI07102**

Amount of Each Receipt this Period  
500.00

**B. MS. HELEN A. WITMYER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1503 AMESHIRE ROAD

City LUTHERVILLE State MD Zip Code 21093-5919

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
03 / 11 / 2014  
**Transaction ID : 2014M04L11AI07103**

Amount of Each Receipt this Period  
300.00

**C. MR. WILLIAM P. WITTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 234 S. 68 STREET

City BOULDER State CO Zip Code 80303-4305

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7500.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07104**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2473 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. OLEN LYNDOS WODRAZKA**  
Full Name (Last, First, Middle Initial)

Mailing Address 29805 N. BROKEN SHALE DRIVE

City SAN TAN VALLEY State AZ Zip Code 85143-3914

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07105**

Amount of Each Receipt this Period  
 300.00

**B. MS. MARION WOHLHIETER**  
Full Name (Last, First, Middle Initial)

Mailing Address 16 HARVARD ROAD

City ANDOVER State MA Zip Code 01810-2520

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI07106**

Amount of Each Receipt this Period  
 50.00

**C. MS. MARION WOHLHIETER**  
Full Name (Last, First, Middle Initial)

Mailing Address 16 HARVARD ROAD

City ANDOVER State MA Zip Code 01810-2520

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07107**

Amount of Each Receipt this Period  
 1.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 351.00

**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 2475 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. PAUL WOLFE**

Mailing Address **23 CORPORATE PLAZA**

City **NEWPORT BEACH**      State **CA**      Zip Code **92660-7911**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **COMAR INVESTMENTS**      Occupation **MANAGING PARTNER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**03 / 10 / 2014**  
**Transaction ID : 2014M04L11AI07111**

Amount of Each Receipt this Period  
**500.00**

Full Name (Last, First, Middle Initial)  
**B. MR. THOMAS E. WOLFE**

Mailing Address **160 LEEWARD LANE**

City **ROSWELL**      State **GA**      Zip Code **30076-3210**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **HEALTHCARE MANAGEMENT SOLUTIONS**      Occupation **APPLICATION DEVELOPER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
**03 / 27 / 2014**  
**Transaction ID : 2014M04L11AI07112**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**C. MRS. YVONNE WOLFENBERGER**

Mailing Address **5555 NW 4TH AVENUE**

City **BOCA RATON**      State **FL**      Zip Code **33432**

FEC ID number of contributing federal political committee.      **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**03 / 04 / 2014**  
**Transaction ID : 2014M04L11AI07113**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **850.00**

**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 2476 OF 2949
	(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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. JEANNE L. WOLFSTONE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9120 N.E. 15TH STREET  
 City CLYDE HILL State WA Zip Code 98004-3305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REALTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI07114**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. DAVID WOLFSWINKEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1225 E. WARNER ROAD UNIT 18  
 City TEMPE State AZ Zip Code 85284-3245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer S.W. PROPERTIES, I.N.C. Occupation REAL ESTATE BROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI07115**  
 Amount of Each Receipt this Period  
 225.00

**C. MR. JAMES L. WOMACK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9401 CHEROKEE TRAIL  
 City TYLER State TX Zip Code 75703-7685  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07116**  
 Amount of Each Receipt this Period  
 201.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	526.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2477 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD L. WONTOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18710 OAK AVENUE  
 City LANSING State IL Zip Code 60438-4112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI07117**  
 Amount of Each Receipt this Period  
 110.00

**B. MR. JOHN R. WOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1109  
 City NAPLES State FL Zip Code 34106-1110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI07118**  
 Amount of Each Receipt this Period  
 250.00

**C. MR. MALCOLM B. WOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22740 LAKE ROAD  
 City ROCKY RIVER State OH Zip Code 44116-1022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI07119**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 610.00  
**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 2478 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ROYCEALEE WOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 107 PARK LANE  
 City LAKE BLUFF State IL Zip Code 60044-2428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LAKE COUNTY Occupation EDUCATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI07120**  
 Amount of Each Receipt this Period  
 120.00

**B. MS. ROYCEALEE WOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 107 PARK LANE  
 City LAKE BLUFF State IL Zip Code 60044-2428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LAKE COUNTY Occupation EDUCATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07121**  
 Amount of Each Receipt this Period  
 55.00

**C. MRS. SARAH M. WOOD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7278 LANE PARK DRIVE  
 City DALLAS State TX Zip Code 75225-2470  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI07122**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 425.00  
**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 2479 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MRS. PAIGE WOODARD</b>		Date of Receipt
Mailing Address 2480 PIONEER PIKE		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
EUGENE	OR	97401-5588
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI07123</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="360.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="360.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. JEFFREY WOODBURY</b>		Date of Receipt
Mailing Address 2005 BAYSHORE DRIVE		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
FLOWER MOUND	TX	75022-5538
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI07124</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
EXXON MOBIL CORPORATON	ENGINEER	<input type="text" value="401.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="601.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. EARL C. WOODEN</b>		Date of Receipt
Mailing Address 1692 CHESAPEAKE PLACE		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
ARROYO GRANDE	CA	93420-5975
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI07125</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="750.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1011.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 2480 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DALE WOODERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1853 S. 13TH STREET

City BLACKWELL State OK Zip Code 74631-6745

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI07126**

Amount of Each Receipt this Period  
 201.00

**B. MR. JOE C. WOODFORD**  
Full Name (Last, First, Middle Initial)

Mailing Address 205 E. CHEYENNE MOUNTAIN BLVD.

City COLORADO SPRINGS State CO Zip Code 80906-3704

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI07127**

Amount of Each Receipt this Period  
 500.00

**C. MR. DONALD WOODLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 8846 WOODINGTON CIR

City INDIANAPOLIS State IN Zip Code 46204

FEC ID number of contributing federal political committee. **C**

Name of Employer WOODLEY FARRA Occupation INVESTMENT ADVISOR

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  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI07128**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 801.00

**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 2481 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES A. WOODS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 401 GOLF DRIVE  
 City HOOVER State AL Zip Code 35226-2316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: PROCESS EQUIPMENT Occupation: EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **401.00**

Date of Receipt: 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07129**  
 Amount of Each Receipt this Period: 150.00

**B. MR. JAMES A. WOODS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 401 GOLF DRIVE  
 City HOOVER State AL Zip Code 35226-2316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: PROCESS EQUIPMENT Occupation: EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **401.00**

Date of Receipt: 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI07130**  
 Amount of Each Receipt this Period: 251.00

**C. MR. JOHN L. WOODS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 994  
 City VIRGINIA BEACH State VA Zip Code 23451-0994  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: ACOSTA SALES Occupation: FOOD BROKER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt: 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI07131**  
 Amount of Each Receipt this Period: 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>451.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2482 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LARRY WOODS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2845 NE 9TH ST  
 404  
 City State Zip Code  
 FORT LAUDERDALE FL 33304-3651  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MIDWEST FINANCIAL SERVICES CO, INC OWNER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI07132**  
 Amount of Each Receipt this Period  
 15000.00

**B. MR. RONALD O. WOODS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 36 POPLAR CREEK DRIVE  
 City State Zip Code  
 ASHEVILLE NC 28805-9716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 355.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI07133**  
 Amount of Each Receipt this Period  
 85.00

**C. MR. WILLIAM WOODS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1009 ORCHARD CIRCLE  
 City State Zip Code  
 DOTHAN AL 36305-5916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07134**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15335.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2483 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD J. WOODWARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4606 KING WILLIAM ROAD  
 City RICHMOND State VA Zip Code 23225-3248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RANDOLPH-MACON COLLEGE Occupation COLLEGE PROFESSOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI07135**  
 Amount of Each Receipt this Period  
 60.00

**B. MRS. MARILYN WOODWARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25251 ROAD Y.  
 City SNYDER State CO Zip Code 80750  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI07136**  
 Amount of Each Receipt this Period  
 111.00

**C. MR. NATHAN J. WOODWARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 530 NORTH EAST STREET  
 City FENTON State MI Zip Code 48430-2724  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07137**  
 Amount of Each Receipt this Period  
 101.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	272.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2484 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. PAUL WOODWARD</b>		Date of Receipt
Mailing Address P.O. BOX 1121		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
BUCYRUS	OH	44820-1121
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI07138</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="315.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MR. PAUL WOODWARD</b>		Date of Receipt
Mailing Address P.O. BOX 1121		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
BUCYRUS	OH	44820-1121
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI07139</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="115.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="315.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MR. RICHARD O. WORNAT</b>		Date of Receipt
Mailing Address 202 WOODLAWN COURT		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2014"/>
City	State	Zip Code
PEARL RIVER	LA	70452-3717
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2014M04L11AI07140</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="256.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="240.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 2485 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. RICHARD O. WORNAT**  
Full Name (Last, First, Middle Initial)

Mailing Address 202 WOODLAWN COURT

City PEARL RIVER State LA Zip Code 70452-3717

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07141**

Amount of Each Receipt this Period  
 30.00

**B. MR. RICHARD O. WORNAT**  
Full Name (Last, First, Middle Initial)

Mailing Address 202 WOODLAWN COURT

City PEARL RIVER State LA Zip Code 70452-3717

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07142**

Amount of Each Receipt this Period  
 1.00

**C. MR. JACK W. WORSHAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 1808 WORSHAM PLACE

City GREENSBORO State NC Zip Code 27408-3114

FEC ID number of contributing federal political committee. **C**

Name of Employer INTERTECH CORPORATION Occupation SALES EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI07143**

Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 151.00

**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 2486 OF 2949
	<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)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MR. JACK W. WORSHAM</b>		Date of Receipt										
Mailing Address 1808 WORSHAM PLACE		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		17		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03		17		2014								
City Greensboro State NC Zip Code 27408-3114		<b>Transaction ID : 2014M04L11AI07144</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer INTERTECH CORPORATION Occupation SALES EXECUTIVE		<b>200.00</b>										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼										
		<b>320.00</b>										

Full Name (Last, First, Middle Initial) <b>B. MERRILL E. WORSLEY</b>		Date of Receipt										
Mailing Address 5901 W. ELLENS FERRY DRIVE APARTMENT 112		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>14</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		14		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03		14		2014								
City Boise State ID Zip Code 83703-3184		<b>Transaction ID : 2014M04L11AI07145</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer RETIRED Occupation RETIRED		<b>250.00</b>										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼										
		<b>250.00</b>										

Full Name (Last, First, Middle Initial) <b>C. MR. ROBERT CLIFFORD WORTHINGTON</b>		Date of Receipt										
Mailing Address 61 HARBOR VIEW POINTE		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	03		17		2014
M M M	/	D D D	/	Y Y Y Y Y Y								
03		17		2014								
City Linwood State MI Zip Code 48634-9479		<b>Transaction ID : 2014M04L11AI07146</b>										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period										
Name of Employer GLOBE FIRE SPRINKLER CORP. Occupation C.E.O.		<b>120.00</b>										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼										
		<b>320.00</b>										

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>570.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2487 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. SANDRA WOZNITSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1308 BAKER CREST COURT  
 City State Zip Code  
 MCLEAN VA 22101-3641  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 C. I. B. T. EXECUTIVE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI07147**  
 Amount of Each Receipt this Period  
 1000.00

**B. MRS. RICHARD WRAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4935 N. RAEBURN DRIVE  
 City State Zip Code  
 CINCINNATI OH 45223-1225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI07148**  
 Amount of Each Receipt this Period  
 100.00

**C. MRS. RICHARD WRAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4935 N. RAEBURN DRIVE  
 City State Zip Code  
 CINCINNATI OH 45223-1225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI07149**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1200.00  
**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 2488 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. RICHARD WRAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4935 N. RAEBURN DRIVE  
 City CINCINNATI State OH Zip Code 45223-1225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI07150**  
 Amount of Each Receipt this Period 1.00

**B. MR. CLYDE C. WRENN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7112 PINWOOD COURT  
 City COLUMBUS State GA Zip Code 31909-2153  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07151**  
 Amount of Each Receipt this Period 126.00

**C. MS. JAMIE MCPHILLIPS WRIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 314 BAY HILL DRIVE  
 City DAPHNE State AL Zip Code 36526-4617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI07152**  
 Amount of Each Receipt this Period 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 237.00  
**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 2489 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN L. WRIGHT**  
Full Name (Last, First, Middle Initial)

Mailing Address 7114 ABERDEEN PARKWAY W.

City TULSA	State OK	Zip Code 74132-2141
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
03	/	03	/	2014

**Transaction ID : 2014M04L11AI07153**

Amount of Each Receipt this Period  
500.00

**B. MRS. MARY WRIGHT**  
Full Name (Last, First, Middle Initial)

Mailing Address 720 BETHANY GREEN COURT

City ALPHARETTA	State GA	Zip Code 30004-4504
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : 2014M04L11AI07154**

Amount of Each Receipt this Period  
100.00

**C. MR. MAURICE WRIGHT**  
Full Name (Last, First, Middle Initial)

Mailing Address 396 DORMAN ROAD

City CONNEAUT	State OH	Zip Code 44030-2859
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : 2014M04L11AI07155**

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	601.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2490 OF 2949		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. RUTH H. WRIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1225 S. OCEAN BLVD.  
 APARTMENT 1106  
 City DELRAY BEACH State FL Zip Code 33483-6564  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07156**  
 Amount of Each Receipt this Period  
 250.00

**B. MS. RUTH H. WRIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1225 S. OCEAN BLVD.  
 APARTMENT 1106  
 City DELRAY BEACH State FL Zip Code 33483-6564  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI07157**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. THOMAS GUY WRIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9727 OLATHE STREET  
 City COMMERCE CITY State CO Zip Code 80022-7127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 03 / 27 / 2014  
**Transaction ID : 2014M04L11AI07158**  
 Amount of Each Receipt this Period  
 101.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 471.00  
**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 2491 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ALBERT L. WRISLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 312 N. NORTHCOTT DRIVE  
 City NORTHPORT State MI Zip Code 49670-9724  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI07159**  
 Amount of Each Receipt this Period  
 270.00

**B. MS. EDRA S. WRYE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2866 SGODA ROAD  
 City MACON State GA Zip Code 31217-8253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI07160**  
 Amount of Each Receipt this Period  
 250.00

**C. MS. EDRA S. WRYE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2866 SGODA ROAD  
 City MACON State GA Zip Code 31217-8253  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI07161**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 570.00  
**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 2492 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LESTER WUERTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2227 CLARK ROAD  
 City RICHMOND State KS Zip Code 66080-9116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07162**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. LESTER WUERTZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2227 CLARK ROAD  
 City RICHMOND State KS Zip Code 66080-9116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI07163**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. STUART E. WUNSH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6 NUTTING PLACE  
 City WEST CALDWELL State NJ Zip Code 07006-7002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NORTH JERSEY EYE ASSOCIATION Occupation MD. OPHTHALMOLOGY  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07164**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 720.00  
**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 2493 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ROXANNE WURTZBACHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 328 SERENITY ROAD  
 City State Zip Code  
 WHEELING WV 26003-1786  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI07165**  
 Amount of Each Receipt this Period  
 250.00

**B. MRS. DOROTHEA E. WYLE YOST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5835 N.W. 80TH AVENUE ROAD  
 City State Zip Code  
 Ocala FL 34482-2024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07166**  
 Amount of Each Receipt this Period  
 50.00

**C. MRS. DOROTHEA E. WYLE YOST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5835 N.W. 80TH AVENUE ROAD  
 City State Zip Code  
 Ocala FL 34482-2024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07167**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 320.00  
**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 2494 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. DOROTHEA E. WYLE YOST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5835 N.W. 80TH AVENUE ROAD

City OCALA	State FL	Zip Code 34482-2024
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI07168**

Amount of Each Receipt this Period  
 50.00

**B. MRS. ARLENE J. WYNIA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1210 LINDEN STREET

City LIVERNE	State MN	Zip Code 56156-1037
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
326.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI07169**

Amount of Each Receipt this Period  
 121.00

**C. MR. RALPH WYNN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11200 CROFTON OVERLOOK COURT

City DULUTH	State GA	Zip Code 30097-1949
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer JACK WYNN & COMPANY, LLC	Occupation PRESIDENT & PRINCIPAL PARTNER
--	---

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  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07170**

Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	371.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2495 OF 2949
	<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	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROBERT C. WYNNE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 20138  
 City ATLANTA State GA Zip Code 30325-0138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI07171**  
 Amount of Each Receipt this Period  
 200.00

**B. MR. WILLIAM A. WYNOT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 533 ALEXIAN WAY APARTMENT 118  
 City SIGNAL MOUNTAIN State TN Zip Code 37377-2094  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07172**  
 Amount of Each Receipt this Period  
 101.00

**C. MRS. BRAD WYSONG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2707 CLUB LAKE TRAIL  
 City MC KINNEY State TX Zip Code 75070-4009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI07173**  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1301.00  
**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 2496 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. SHOYEI YAMAUCHI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3118 RAWHIDE DRIVE  
 City PRESCOTT State AZ Zip Code 86305-4156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Y.M.G, L.L.C. Occupation REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07174**  
 Amount of Each Receipt this Period  
 120.00

**B. KAM-WING YAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 25 KILLYBEGS ROAD  
 City ALAMEDA State CA Zip Code 94502-7702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2014  
**Transaction ID : 2014M04L11AI07175**  
 Amount of Each Receipt this Period  
 275.00

**C. MRS. MERYL ROBIN YARBOROUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 111 VICTORIA DRIVE  
 City MONTGOMERY State TX Zip Code 77356-8446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI07176**  
 Amount of Each Receipt this Period  
 150.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	545.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2497 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. PHILLIP YARBOROUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 344 NEWBERRY STREET SW  
 City State Zip Code  
 AIKEN SC 29801-4838  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 REQUESTED REQUESTED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07177**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. MARK GEORGE YARNEVIC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13805 N. 103RD WAY  
 City State Zip Code  
 SUN CITY AZ 85351-2219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 301.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07178**  
 Amount of Each Receipt this Period  
 101.00

**C. MR. ALBERT D. YARYAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1114 CHARTER COURT  
 City State Zip Code  
 VIRGINIA BEACH VA 23454-5107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HYDRAULIC SALES HYDRAULIC SALES  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI07179**  
 Amount of Each Receipt this Period  
 205.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 426.00  
**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 2498 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. GEORGE M. YATES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1933  
 City ROSWELL State NM Zip Code 88202-1933  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HEYCO ENERGY GROUP, INC. Occupation PRESIDENT & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI07180**  
 Amount of Each Receipt this Period  
 32400.00

**B. MR. JAMES YBARRONDO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3845 LAKE POINT DRIVE  
 City HELENA State MT Zip Code 59602-6444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07181**  
 Amount of Each Receipt this Period  
 220.00

**C. FRANK YEARY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1707 GRAND VIEW DR  
 City BERKELEY State CA Zip Code 94705-1639  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CAMBerview PARTNERS Occupation EXECUTIVE CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI07182**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 32870.00  
**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 2499 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DANIEL D. F. YELLOTT III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12806 GORES MILL ROAD  
 City REISTERSTOWN State MD Zip Code 21136-5130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07183**  
 Amount of Each Receipt this Period  
 201.00

**B. MR. WILLIAM V. YELTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2280 FOWLER AVENUE  
 City CANON CITY State CO Zip Code 81212-3930  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation WRITER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07184**  
 Amount of Each Receipt this Period  
 110.00

**C. MR. WILLIAM V. YELTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2280 FOWLER AVENUE  
 City CANON CITY State CO Zip Code 81212-3930  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation WRITER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07185**  
 Amount of Each Receipt this Period  
 201.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 512.00  
**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 2500 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARY JO YEP-GULINO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4200 OLD COLUMBIA PIKE  
 City ANNANDALE State VA Zip Code 22003-2122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07186**  
 Amount of Each Receipt this Period  
 150.00

**B. MS. MARY JO YEP-GULINO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4200 OLD COLUMBIA PIKE  
 City ANNANDALE State VA Zip Code 22003-2122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07187**  
 Amount of Each Receipt this Period  
 50.00

**C. MS. MARY JO YEP-GULINO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4200 OLD COLUMBIA PIKE  
 City ANNANDALE State VA Zip Code 22003-2122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI07188**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2501 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. MARY JO YEP-GULINO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4200 OLD COLUMBIA PIKE  
 City ANNANDALE State VA Zip Code 22003-2122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07189**  
 Amount of Each Receipt this Period 50.00

**B. MRS. MARION S. YERKES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3679 BLACKFOOT COURT S.W.  
 City GRANDVILLE State MI Zip Code 49418-1721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07190**  
 Amount of Each Receipt this Period 200.00

**C. MRS. MARION S. YERKES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3679 BLACKFOOT COURT S.W.  
 City GRANDVILLE State MI Zip Code 49418-1721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI07191**  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 2502 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LOWELL B. YODER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 444  
 City HOLLAND State OH Zip Code 43528-0444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07192**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. LOWELL B. YODER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 444  
 City HOLLAND State OH Zip Code 43528-0444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI07193**  
 Amount of Each Receipt this Period  
 100.00

**C. MR. LOWELL B. YODER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 444  
 City HOLLAND State OH Zip Code 43528-0444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07194**  
 Amount of Each Receipt this Period  
 100.00

**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 2503 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. LOWELL B. YODER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 444  
 City HOLLAND State OH Zip Code 43528-0444  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI07195**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. BYRON YORDANOPOULOS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4706 BROOKVIEW DRIVE  
 City SUGAR LAND State TX Zip Code 77479-3072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AI-SEALING L.L.C. Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI07196**  
 Amount of Each Receipt this Period  
 165.00

**C. MR. HANSELL N. YORK III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 135 SAINT ANDREWS DRIVE  
 City JACKSON State MS Zip Code 39211-2532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ARTHUR ANDERSON, L.L.P. Occupation ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07197**  
 Amount of Each Receipt this Period  
 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	515.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 2504 OF 2949  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. W. YORK**

Mailing Address P.O. BOX 1894

City State Zip Code  
BROOKINGS OR 97415-0054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
271.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 06 / 2014  
**Transaction ID : 2014M04L11AI07198**

Amount of Each Receipt this Period  
35.00

Full Name (Last, First, Middle Initial)  
**B. MR. W. YORK**

Mailing Address P.O. BOX 1894

City State Zip Code  
BROOKINGS OR 97415-0054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
271.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07199**

Amount of Each Receipt this Period  
35.00

Full Name (Last, First, Middle Initial)  
**C. MR. W. YORK**

Mailing Address P.O. BOX 1894

City State Zip Code  
BROOKINGS OR 97415-0054

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
271.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 26 / 2014  
**Transaction ID : 2014M04L11AI07200**

Amount of Each Receipt this Period  
36.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 106.00

**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 2505 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. DAVID YOUNBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 215 SOUTH 10TH STREET  
 City SAC CITY State IA Zip Code 50583-2137  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI07201**  
 Amount of Each Receipt this Period  
 1000.00

**B. MRS. BETTY E. YOUNG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1205 THOMAS DRIVE S.W.  
 City DECATUR State AL Zip Code 35601-2758  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07202**  
 Amount of Each Receipt this Period  
 120.00

**C. MRS. BETTY E. YOUNG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1205 THOMAS DRIVE S.W.  
 City DECATUR State AL Zip Code 35601-2758  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI07203**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1170.00  
**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 2506 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD J. YOUNG JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 E. 13TH AVENUE  
 City ANCHORAGE State AK Zip Code 99501-4520  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07204**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. EDWARD J. YOUNG JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 E. 13TH AVENUE  
 City ANCHORAGE State AK Zip Code 99501-4520  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07205**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. EDWARD J. YOUNG JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 E. 13TH AVENUE  
 City ANCHORAGE State AK Zip Code 99501-4520  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L11AI07206**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00  
**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 2507 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD S. YOUNG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1673 WYNTRE BROOKE DRIVE  
 City YORK State PA Zip Code 17403-4543  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07207**  
 Amount of Each Receipt this Period  
 110.00

**B. MR. EDWARD S. YOUNG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1673 WYNTRE BROOKE DRIVE  
 City YORK State PA Zip Code 17403-4543  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07208**  
 Amount of Each Receipt this Period  
 111.00

**C. MR. EDWARD S. YOUNG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1673 WYNTRE BROOKE DRIVE  
 City YORK State PA Zip Code 17403-4543  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI07209**  
 Amount of Each Receipt this Period  
 55.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 276.00  
**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 2508 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. GERALD D. YOUNG JR.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 25399 BARSUMIAN DRIVE  
City TOWER LAKES State IL Zip Code 60010-1120  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI07210**  
Amount of Each Receipt this Period 165.00

**B. DR. GERALD D. YOUNG JR.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 25399 BARSUMIAN DRIVE  
City TOWER LAKES State IL Zip Code 60010-1120  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 26 / 2014  
**Transaction ID : 2014M04L11AI07211**  
Amount of Each Receipt this Period 165.00

**C. MR. GERALD J. YOUNG**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1000 MADISON STREET UNIT 101  
City CHESTER State PA Zip Code 19013-5958  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07212**  
Amount of Each Receipt this Period 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00  
**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 2509 OF 2949
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JUNE A. YOUNG**  
Full Name (Last, First, Middle Initial)

Mailing Address 2811 SE 19TH PLACE

City CAPE CORAL State FL Zip Code 33904-3007

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI07213**

Amount of Each Receipt this Period  
 1000.00

**B. MR. RANDALL YOUNG**  
Full Name (Last, First, Middle Initial)

Mailing Address 26269 MESA PLACE

City CARMEL State CA Zip Code 93923-8921

FEC ID number of contributing federal political committee. **C**

Name of Employer LIONSHARE MEDIA SERVICES Occupation ADVERTISING AGENCY OWNER

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  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI07214**

Amount of Each Receipt this Period  
 250.00

**C. MR. ROBERT D. YOUNG**  
Full Name (Last, First, Middle Initial)

Mailing Address 2849 CAPISTRANO WAY

City NAPLES State FL Zip Code 34105-3001

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11AI07215**

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2510 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. HON. ROBERT P. YOUNG JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3034 W. GRAND BLVD.  
 SUITE 8-500  
 City State Zip Code  
 DETROIT MI 48202-6010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MICHIGAN SUPREME COURT JUSTICE  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : 2014M04L11AI07216**  
 Amount of Each Receipt this Period  
 215.00

**B. MRS. RONDA YOUNG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4872 ROEDING ROAD  
 City State Zip Code  
 CERES CA 95307-9459  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BURCE YOUNG D.D.S. BUSINESS MANAGER  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07217**  
 Amount of Each Receipt this Period  
 125.00

**C. MRS. JOAN ZACHAROPOULOS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17 ROLLING RIDGE ROAD  
 City State Zip Code  
 NEW CITY NY 10956-6931  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MAINTENANCE RADIO. PHYSICIST  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014  
**Transaction ID : 2014M04L11AI07218**  
 Amount of Each Receipt this Period  
 205.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	545.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2511 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ABRAHAM L. ZADOKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7107 N. WINDCHIME COURT  
 City State Zip Code  
 PEORIA IL 61614-1187  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07219**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. JOHN ZAHARIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5829 213TH STREET  
 City State Zip Code  
 BAYSIDE HILLS NY 11364-1827  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07220**  
 Amount of Each Receipt this Period  
 130.00

**C. MRS. LORRAINE A. ZAHM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22 CARMINA CIRCLE  
 City State Zip Code  
 CRANSTON RI 02921-1227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 WALMART CASHIER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 05 / 2014  
**Transaction ID : 2014M04L11AI07221**  
 Amount of Each Receipt this Period  
 60.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 310.00  
**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 2512 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. LORRAINE A. ZAHM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22 CARMINA CIRCLE  
 City CRANSTON State RI Zip Code 02921-1227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WALMART Occupation CASHIER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07222**  
 Amount of Each Receipt this Period 56.00

**B. DR. FAISSAL ZAHRAWI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10108 TAVISTOCK ROAD  
 City ORLANDO State FL Zip Code 32827-7053  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI07223**  
 Amount of Each Receipt this Period 500.00

**C. MRS. BEVERLY ZALESKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1474 E. MOUNTAIN DRIVE  
 City MONTECITO State CA Zip Code 93108-1245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI07224**  
 Amount of Each Receipt this Period 32400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 32956.00  
**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 2513 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES ZALESKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1474 EAST MOUNTAIN DRIVE  
 City State Zip Code  
 MONTECITO CA 93108-1245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI07225**  
 Amount of Each Receipt this Period  
 32400.00

**B. MR. STANLEY ZALKIND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1780  
 City State Zip Code  
 LA JOLLA CA 92038-1780  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07226**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. GEORGE J. ZALLIE JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1004 BRICK ROAD  
 City State Zip Code  
 CHERRY HILL NJ 08003-4412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 ZOLLIE SUPERMARKETS CO - PRESIDENT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07227**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 32770.00  
**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 2514 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHNNY ZAMRZLA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2229 EAST AVENUE Q  
 2229 EAST AVENUE Q  
 City PALMDALE State CA Zip Code 93550-4140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WESTERN PACIFIC Occupation ROOFING & SHEETMETAL CONTRACTOR  
 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  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI07228**  
 Amount of Each Receipt this Period  
 100.00

**B. MR. RICHARD A. ZAPPALA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6800 SE HARBOR CIRCLE  
 City STUART State FL Zip Code 34996-1968  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI07229**  
 Amount of Each Receipt this Period  
 1000.00

**C. MS. JANE ZAVISCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1718  
 City THREE RIVERS State TX Zip Code 78071-1718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07230**  
 Amount of Each Receipt this Period  
 110.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1210.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2515 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. JANE ZECHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 SADDLE BROOK DRIVE  
 City State Zip Code  
 HO HO KUS NJ 07423-1315  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07231**  
 Amount of Each Receipt this Period  
 250.00

**B. MS. OLIVIA ZEGAROWSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1045 CASCADE STREET  
 City State Zip Code  
 PITTSFIELD MA 01201-1243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07232**  
 Amount of Each Receipt this Period  
 25.00

**C. MS. OLIVIA ZEGAROWSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1045 CASCADE STREET  
 City State Zip Code  
 PITTSFIELD MA 01201-1243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07233**  
 Amount of Each Receipt this Period  
 25.00

**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: PAGE 2516 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. OLIVIA ZEGAROWSKI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1045 CASCADE STREET  
 City State Zip Code  
 PITTSFIELD MA 01201-1243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07234**  
 Amount of Each Receipt this Period  
 25.00

**B. MR. LOWELL D. ZEHNDER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 201 18TH STREET  
 City State Zip Code  
 HUNTINGTON BEACH CA 92648-3903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 660.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07235**  
 Amount of Each Receipt this Period  
 660.00

**C. MS. NAN ZEILE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2967 SHALE CT  
 City State Zip Code  
 SUPERIOR CO 80027-6073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 LEVEL 3 COMMUNICATIONS PRODUCT MANAGER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 398.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07236**  
 Amount of Each Receipt this Period  
 398.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1083.00  
**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 2517 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. COLONEL MERLE M. ZEINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 252A ESTATES DRIVE  
 APARTMENT A.  
 City CHICO State CA Zip Code 95928-7413  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI07237**  
 Amount of Each Receipt this Period  
 116.00

**B. MR. DIRK E. ZEITERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 762 PLANTERS MANOR WAY  
 City BRADENTON State FL Zip Code 34212-2629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 19 / 2014  
**Transaction ID : 2014M04L11AI07238**  
 Amount of Each Receipt this Period  
 50.00

**C. MR. DIRK E. ZEITERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 762 PLANTERS MANOR WAY  
 City BRADENTON State FL Zip Code 34212-2629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07239**  
 Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	176.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2518 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DIRK E. ZEITERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 762 PLANTERS MANOR WAY  
 City BRADENTON State FL Zip Code 34212-2629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07240**  
 Amount of Each Receipt this Period  
 20.00

**B. MR. DIRK E. ZEITERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 762 PLANTERS MANOR WAY  
 City BRADENTON State FL Zip Code 34212-2629  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07241**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. ERNEST ZELLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 52605 BROOKTRAIL DRIVE  
 City SOUTH BEND State IN Zip Code 46637-3006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer METALSTAMP, INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11AI07242**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 521.00  
**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 2519 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. KENNETH ZEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4013 GOLF AVENUE  
 City LITTLE RIVER State SC Zip Code 29566-8027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REQUESTED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014  
**Transaction ID : 2014M04L11AI07243**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. STEPHEN ZEMKO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 305 NORTHWOOD DRIVE  
 City AIKEN State SC Zip Code 29803-7717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07244**  
 Amount of Each Receipt this Period  
 275.00

**C. MRS. CAROL ZEPLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13845 U.S. HIGHWAY 77 N.  
 City VICTORIA State TX Zip Code 77904-5504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07245**  
 Amount of Each Receipt this Period  
 165.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 490.00  
**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 2520 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MS. JOANNE A. ZERVOS**

Mailing Address 144 EAST 84TH ST  
11F

City NEW YORK State NY Zip Code 10028-2004

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014  
**Transaction ID : 2014M04L11AI07246**

Amount of Each Receipt this Period  
150.00

Full Name (Last, First, Middle Initial)  
**B. MRS. EVELYN J. ZIAYLEK**

Mailing Address 1382 NEWTOWN LANGHORNE ROAD  
PENNSWOOD VILLAGE

City NEWTOWN State PA Zip Code 18940-2418

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07247**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. MRS. EVELYN J. ZIAYLEK**

Mailing Address 1382 NEWTOWN LANGHORNE ROAD  
PENNSWOOD VILLAGE

City NEWTOWN State PA Zip Code 18940-2418

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI07248**

Amount of Each Receipt this Period  
185.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 385.00

**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 2521 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. EVELYN J. ZIAYLEK**  
Full Name (Last, First, Middle Initial)

Mailing Address 1382 NEWTOWN LANGHORNE ROAD  
PENNSWOOD VILLAGE

City NEWTOWN State PA Zip Code 18940-2418

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
03 / 21 / 2014  
Transaction ID : 2014M04L11AI07249

Amount of Each Receipt this Period  
101.00

**B. MR. EDWARD R. ZIEGLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2015 CLAREMONT LANE

City HOUSTON State TX Zip Code 77019-5803

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
03 / 26 / 2014  
Transaction ID : 2014M04L11AI07250

Amount of Each Receipt this Period  
100.00

**C. MR. PHILIP J. ZIEGLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 927 PARKTON DRIVE

City WAUKESHA State WI Zip Code 53189-7844

FEC ID number of contributing federal political committee. **C**

Name of Employer IN PRO CORPORATION Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
03 / 17 / 2014  
Transaction ID : 2014M04L11AI07251

Amount of Each Receipt this Period  
10000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10201.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2522 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MR. BRUCE ZIERKE**

Mailing Address **27 RIVERVIEW DRIVE**

City <b>MORRIS</b>	State <b>MN</b>	Zip Code <b>56267-9475</b>
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>MANAGEMENT - CONSULTING</b>
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2014

**Transaction ID : 2014M04L11AI07252**

Amount of Each Receipt this Period  

1000.00
---------

Full Name (Last, First, Middle Initial)  
**B. MS. VERA J. ZIMOWSKI**

Mailing Address **7165 LAKESIDE DRIVE**

City <b>SARASOTA</b>	State <b>FL</b>	Zip Code <b>34243-3844</b>
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>REQUESTED</b>	Occupation <b>REQUESTED</b>
--------------------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2014

**Transaction ID : 2014M04L11AI07253**

Amount of Each Receipt this Period  

110.00
--------

Full Name (Last, First, Middle Initial)  
**C. MS. VERA J. ZIMOWSKI**

Mailing Address **7165 LAKESIDE DRIVE**

City <b>SARASOTA</b>	State <b>FL</b>	Zip Code <b>34243-3844</b>
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>REQUESTED</b>	Occupation <b>REQUESTED</b>
--------------------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2014

**Transaction ID : 2014M04L11AI07254**

Amount of Each Receipt this Period  

100.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1210.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2523 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. SHARON ZINKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W6458 CITY Y. ROAD  
 City BROWNSVILLE State WI Zip Code 53006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07255**  
 Amount of Each Receipt this Period  
 90.00

**B. MRS. SHARON ZINKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W6458 CITY Y. ROAD  
 City BROWNSVILLE State WI Zip Code 53006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11AI07256**  
 Amount of Each Receipt this Period  
 120.00

**C. MR. JAMES F. ZINKOVITCH SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10239 STARR HILL ROAD  
 City REMSEN State NY Zip Code 13438-4531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI07257**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	310.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2524 OF 2949  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN ZIZAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 118 N. JACKSON AVENUE  
 City ENDICOTT State NY Zip Code 13760-3015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : 2014M04L11AI07258**  
 Amount of Each Receipt this Period  
 50.00

**B. MR. JOHN ZIZAK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 118 N. JACKSON AVENUE  
 City ENDICOTT State NY Zip Code 13760-3015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2014  
**Transaction ID : 2014M04L11AI07259**  
 Amount of Each Receipt this Period  
 1.00

**C. MR. JEFFREY ZOLLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1503 N. ALEXANDER STREET  
 City HOISINGTON State KS Zip Code 67544-1617  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer J.R.Z. ENTERPRISES Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014  
**Transaction ID : 2014M04L11AI07260**  
 Amount of Each Receipt this Period  
 120.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 171.00  
**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 2525 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. EDWARD J. ZORE**  
Full Name (Last, First, Middle Initial)

Mailing Address 2505 W. DEAN ROAD

City RIVER HILLS State WI Zip Code 53217-2010

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2014  
**Transaction ID : 2014M04L11AI07261**

Amount of Each Receipt this Period  
 32400.00

**B. MRS. NANCY J. ZRULL**  
Full Name (Last, First, Middle Initial)

Mailing Address 6133 W. WYANDOTTE ROAD

City MAUMEE State OH Zip Code 43537-1334

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI07262**

Amount of Each Receipt this Period  
 1.00

**C. MR. JEFFREY I. ZUCKERMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1217 N. BELGRADE ROAD

City SILVER SPRING State MD Zip Code 20902-3023

FEC ID number of contributing federal political committee. **C**

Name of Employer CUTIS, MALLET-PREVONT, COTT & MOSIE L Occupation LAWYER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2014  
**Transaction ID : 2014M04L11AI07263**

Amount of Each Receipt this Period  
 125.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32526.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2526 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DANIEL A. ZWICKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4163 HYACINTH CIRCLE S.  
 City WEST PALM BCH State FL Zip Code 33410-5553  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014  
**Transaction ID : 2014M04L11AI07264**  
 Amount of Each Receipt this Period  
 120.00

**B. MR. DANIEL A. ZWICKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4163 HYACINTH CIRCLE S.  
 City WEST PALM BCH State FL Zip Code 33410-5553  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L11AI07265**  
 Amount of Each Receipt this Period  
 26.00

**C. DR. LETICIA Q. DELPILAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12 WESTOVER LANE  
 City PALM COAST State FL Zip Code 32164-7743  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI07266**  
 Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	246.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2527 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DR. LETICIA Q. DELPILAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12 WESTOVER LANE  
 City PALM COAST State FL Zip Code 32164-7743  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11AI07267**  
 Amount of Each Receipt this Period 150.00

**B. MR. FLOYD DUANE ACKERMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1180 PEACHTREE STREET NE SUITE 2020  
 City ATLANTA State GA Zip Code 30309-7525  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00002**  
 Amount of Each Receipt this Period 12500.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**C. MR. DAVID B. ALLMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2661 ORCHARD RUN SE  
 City ATLANTA State GA Zip Code 30339-4651  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REGENT PARTNERS, LLC Occupation CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00003**  
 Amount of Each Receipt this Period 5000.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**SUBTOTAL** of Receipts This Page (optional).....▶ 150.00  
**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 2528 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAKE F. ARONOV**  
Full Name (Last, First, Middle Initial)

Mailing Address 2724 PEACHTREE RD NW  
APT 703

City ATLANTA State GA Zip Code 30305-2957

FEC ID number of contributing federal political committee. **C**

Name of Employer ARONOV REALTY MANAGEMENT, INC. Occupation CHAIRMAN & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00004**

Amount of Each Receipt this Period 12500.00

**[MEMO ITEM]**  
INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**B. MR. JAMES S. BALLOUN**  
Full Name (Last, First, Middle Initial)

Mailing Address 133 PEACHTREE STREET N.E.  
SUITE 4600

City ATLANTA State GA Zip Code 30303-1821

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00005**

Amount of Each Receipt this Period 12500.00

**[MEMO ITEM]**  
INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**C. EDWARD BASTIAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 2424 THURLESTON LANE

City DULUTH State GA Zip Code 30097-7409

FEC ID number of contributing federal political committee. **C**

Name of Employer DELTA AIR LINES Occupation PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00006**

Amount of Each Receipt this Period 5000.00

**[MEMO ITEM]**  
INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**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 2529 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. ELIZABETH BLAKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3136 HABERSHAM RD NW  
 City ATLANTA State GA Zip Code 30305-2059  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HABITAT FOR HUMANITY INTERNATIONAL Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 16200.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00007**  
 Amount of Each Receipt this Period 16200.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**B. ELIZABETH BUTLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1111 BAY AVENUE #400  
 City COLUMBUS State GA Zip Code 31901-5267  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00008**  
 Amount of Each Receipt this Period 2500.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**C. MR. STEPHEN T. BUTLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 140  
 City COLUMBUS State GA Zip Code 31902-0140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer W.C. BRADLEY COMPANY Occupation CHAIRMAN & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00009**  
 Amount of Each Receipt this Period 2500.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**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 2530 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JACK DONALD CHILDRESS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 GALLERIA PARKWAY, SE  
 SUITE 600  
 City ATLANTA State GA Zip Code 30339-5949  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CHILDRESS KLEIN PROPERTIES Occupation REAL ESTATE DEVELOPER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00011**  
 Amount of Each Receipt this Period 2500.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**B. MR. FREDERICK E. COOPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P. O. BOX 52367  
 City ATLANTA State GA Zip Code 30355-0367  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer COOPER CAPITAL Occupation CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00012**  
 Amount of Each Receipt this Period 12500.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**C. MR. CHARLES G. CRAWLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2575 PEACHTREE ROAD N.E. #17G  
 City ATLANTA State GA Zip Code 30305-3640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2540.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00013**  
 Amount of Each Receipt this Period 2500.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**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 2531 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MRS. ANN L. DAVIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2450 W. WESLEY ROAD NW

City ATLANTA State GA Zip Code 30327-2032

FEC ID number of contributing federal political committee. **C**

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00014**

Amount of Each Receipt this Period  
 12500.00

**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**B. MR. JAY M. DAVIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2450 W. WESLEY ROAD NW

City ATLANTA State GA Zip Code 30327-2032

FEC ID number of contributing federal political committee. **C**

Name of Employer: **NATIONAL DISTRIBUTING COMPANY** Occupation: **CHAIRMAN AND CEO**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00015**

Amount of Each Receipt this Period  
 12500.00

**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**C. MR. MARTIN L. FLANAGAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 700 FAIRFIELD ROAD NW

City ATLANTA State GA Zip Code 30327-3224

FEC ID number of contributing federal political committee. **C**

Name of Employer: **INVESCO SERVICES, INC.** Occupation: **PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00016**

Amount of Each Receipt this Period  
 12500.00

**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**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 2532 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. ROBERT F. HATCHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 5001  
 City MACON State GA Zip Code 31208-5001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MIDCOUNTRY FINANCIAL CORP. Occupation PRESIDENT & CEO  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2500.00**

Date of Receipt **03 / 31 / 2014**  
**Transaction ID : 2014M04L11JFCCT00018**  
 Amount of Each Receipt this Period **2500.00**  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**B. MS. REGINA C. HENNESSY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 31205 N. 62ND STREET  
 City CAVE CREEK State AZ Zip Code 85331-6007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **6250.00**

Date of Receipt **03 / 31 / 2014**  
**Transaction ID : 2014M04L11JFCCT00019**  
 Amount of Each Receipt this Period **6250.00**  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**C. STEPHEN R. HENNESSY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7261 JONESBORO ROAD  
 City MORROW State GA Zip Code 30260-2910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HENNESSY AUTOMOBILE COMPANIES Occupation AUTOMOBILE DEALER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **6250.00**

Date of Receipt **03 / 31 / 2014**  
**Transaction ID : 2014M04L11JFCCT00020**  
 Amount of Each Receipt this Period **6250.00**  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**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 2533 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. DOUGLAS J. HERTZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 3741 PACES VALLEY ROAD NW

City ATLANTA State GA Zip Code 30327-3207

FEC ID number of contributing federal political committee. **C**

Name of Employer UNITED DISTRIBUTORS, INC. Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00021**

Amount of Each Receipt this Period  
 12500.00

**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**B. MR. RICHARD L. JACKSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2655 NORTHWINDS PARKWAY

City ALPHARETTA State GA Zip Code 30009-2280

FEC ID number of contributing federal political committee. **C**

Name of Employer JACKSON HEALTHCARE, LLC Occupation CHAIRMAN & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00022**

Amount of Each Receipt this Period  
 12500.00

**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**C. MS. WILMA MARCUS**  
Full Name (Last, First, Middle Initial)

Mailing Address 77179 AYRSHIRE LANE

City BOCA RATON State FL Zip Code 33496

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00023**

Amount of Each Receipt this Period  
 12500.00

**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**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 2534 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. AMOS R. MCMULLIAN SR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6497 MESSER ROAD  
 City GRAND RIDGE State FL Zip Code 32442-4231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00024**  
 Amount of Each Receipt this Period  
 12500.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**B. MRS. BETH BICKLEY REAGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 404 BLACKLAND ROAD NW  
 City ATLANTA State GA Zip Code 30342-4005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOMEMAKER Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6250.00

Date of Receipt  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00025**  
 Amount of Each Receipt this Period  
 6250.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**C. MR. ROBERT WEBB REAGAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 404 BLACKLAND ROAD NW  
 City ATLANTA State GA Zip Code 30342-4005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REAGAN CONSULTING Occupation MANAGEMENT CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6250.00

Date of Receipt  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00026**  
 Amount of Each Receipt this Period  
 6250.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 2535 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES M. REYNOLDS III**  
Full Name (Last, First, Middle Initial)

Mailing Address 2561 LAKE OCONEE PARKWAY

City Greensboro State GA Zip Code 30642-3305

FEC ID number of contributing federal political committee. **C**

Name of Employer ALL AMERICAN REAL ESTATE INVESTMENT Occupation MANAGING PARTNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2014  
Transaction ID : 2014M04L11JFCCT00027

Amount of Each Receipt this Period 5000.00

**[MEMO ITEM]**  
INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**B. MR. JEFFREY CRAIG SPRECHER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3650 TUXEDO ROAD NW

City Atlanta State GA Zip Code 30305-1068

FEC ID number of contributing federal political committee. **C**

Name of Employer INTERCONTINENTAL EXCHANGE, INC. Occupation CHAIRMAN & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 31 / 2014  
Transaction ID : 2014M04L11JFCCT00028

Amount of Each Receipt this Period 2500.00

**[MEMO ITEM]**  
INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**C. MR. J. RONALD TERWILLIGER**  
Full Name (Last, First, Middle Initial)

Mailing Address TWO BUCKHEAD PLAZA  
3050 PEACHTREE ROAD, SUITE 500

City Atlanta State GA Zip Code 30305-2296

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 31 / 2014  
Transaction ID : 2014M04L11JFCCT00029

Amount of Each Receipt this Period 750.00

**[MEMO ITEM]**  
INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**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 2536 OF 2949
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MS. PATRICIA TERWILLIGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6020 WINTERTHUR DRIVE NW  
 City ATLANTA State GA Zip Code 30328-4623  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00030**  
 Amount of Each Receipt this Period 12500.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**B. MRS. CAROL B. TOME**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3775 RANDALL MILL ROAD, NORTHWEST  
 City ATLANTA State GA Zip Code 30327-2747  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOME DEPOT STORE SUPPORT, LLC Occupation EVP CORPORATE SERVICES & CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00032**  
 Amount of Each Receipt this Period 5000.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**C. MR. MARK C. WEST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3587 TUXEDO PARK NW  
 City ATLANTA State GA Zip Code 30305-1041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FIRST BEACON INVESTMENTS, INC. Occupation CHAIRMAN & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00033**  
 Amount of Each Receipt this Period 12500.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**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 2537 OF 2949
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JERRY C. WILKINSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2115 CLAY DRIVE  
 City ATLANTA State GA Zip Code 30350-3605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00034**  
 Amount of Each Receipt this Period 5000.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**B. D. RICHARD WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3344 PEACHTREE ROAD UNIT 4502  
 City ATLANTA State GA Zip Code 30326-4822  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PRIMERICA, INC. Occupation CO-CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00035**  
 Amount of Each Receipt this Period 5000.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**C. MR. JAMES E. WINCHESTER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3490 PIEDMONT ROAD N.E. SUITE 1300  
 City ATLANTA State GA Zip Code 30305-4811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE QUIKRETE COMPANIES Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00036**  
 Amount of Each Receipt this Period 12500.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**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 2538 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JOHN O. WINCHESTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3094 E. PINE VALLEY ROAD N. W.  
 City ATLANTA State GA Zip Code 30305-1954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer THE QUIKRETE COMPANIES Occupation EXECUTIVE VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00037**  
 Amount of Each Receipt this Period 25000.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**B. MR. ROBERT A. YELLOWLEES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 53134  
 City ATLANTA State GA Zip Code 30355-1134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00038**  
 Amount of Each Receipt this Period 12500.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

**C. MR. CARL FERENBACH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 COMMONWEALTH AVE PH5  
 City BOSTON State MA Zip Code 02116-3161  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HIGH MEADOWS FOUNDATION Occupation CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt 02 / 28 / 2014  
**Transaction ID : 2014M04L11JFCCT00044**  
 Amount of Each Receipt this Period 32400.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF MASSACHUSETTS VICTORY JFC

**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 2539 OF 2949
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. JAMES B. G. HEARTY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27 SILVER HILL ROAD  
 City WESTON State MA Zip Code 02493-1330  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CLOUGH CAPITAL Occupation MANAGING PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : 2014M04L11JFCCT00045**  
 Amount of Each Receipt this Period  
 32400.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF MASSACHUSETTS VICTORY JFC

**B. MR. MARTIN J. MANNION**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13 COMMONWEALTH AVENUE  
 City BOSTON State MA Zip Code 02116-2122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SUMMIT PARTNERS, LP Occupation FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 30000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : 2014M04L11JFCCT00046**  
 Amount of Each Receipt this Period  
 30000.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF MASSACHUSETTS VICTORY JFC

**C. MR. DAVID M BREAZZANO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 193 DUTTON ROAD  
 City SUDBURY State MA Zip Code 01776  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DDJ CAPITAL MANAGEMENT, LLC Occupation INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 22200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014  
**Transaction ID : 2014M04L11JFCCT00047**  
 Amount of Each Receipt this Period  
 22200.00  
**[MEMO ITEM]**  
 INDIVIDUAL CONTRIBUTION MEMO OF MASSACHUSETTS VICTORY JFC

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 2540 OF 2949  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MR. ROGER M MARINO**  
Full Name (Last, First, Middle Initial)  
Mailing Address 254 WESTFIELD STREET  
City DEDHAM State MA Zip Code 02026  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 32400.00

Date of Receipt 03 / 28 / 2014  
**Transaction ID : 2014M04L11JFCCT00048**  
Amount of Each Receipt this Period 32400.00  
**[MEMO ITEM]**  
INDIVIDUAL CONTRIBUTION MEMO OF MASSACHUSETTS VICTORY JFC

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4203792.79

**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 2541 OF 2949
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ALAMO PAC</b>		Date of Receipt
Mailing Address <b>PO BOX 13026</b>		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2014"/>
City	State	Zip Code
<b>AUSTIN</b>	<b>TX</b>	<b>78711</b>
FEC ID number of contributing federal political committee. <b>C C00387464</b>		<b>Transaction ID : 2014M04L11CPC00001</b>
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period
Aggregate Year-to-Date ▼		<input type="text" value="15000.00"/>
		<input type="text" value="15000.00"/>

Full Name (Last, First, Middle Initial) <b>B. ASSOCIATED BUILDERS &amp; CONTRACTORS PAC</b>		Date of Receipt
Mailing Address <b>4250 NORTH FAIRFAX DRIVE 9TH FLOOR</b>		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
<b>ARLINGTON</b>	<b>VA</b>	<b>22203</b>
FEC ID number of contributing federal political committee. <b>C C00010421</b>		<b>Transaction ID : 2014M04L11CPC00002</b>
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period
Aggregate Year-to-Date ▼		<input type="text" value="7500.00"/>
		<input type="text" value="7500.00"/>

Full Name (Last, First, Middle Initial) <b>C. ASSOCIATED GENERAL CONTRACTORS OF AMERICA</b>		Date of Receipt
Mailing Address <b>2300 WILSON BLVD SUITE 400</b>		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
<b>ARLINGTON</b>	<b>VA</b>	<b>22201</b>
FEC ID number of contributing federal political committee. <b>C C00082917</b>		<b>Transaction ID : 2014M04L11CPC00003</b>
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period
Aggregate Year-to-Date ▼		<input type="text" value="15000.00"/>
		<input type="text" value="15000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="37500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 2542 OF 2949
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. EMPLOYEES OF NORTHRUP GRUMMAN PAC</b>		Date of Receipt
Mailing Address 2980 FAIRVIEW PARK DRIVE CORPORATION PAC		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City State Zip Code FALLS CHURCH VA 22042		<b>Transaction ID : 2014M04L11CPC00004</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00088591"/>		Amount of Each Receipt this Period <input type="text" value="15000.00"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="15000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. EXELON PAC</b>		Date of Receipt
Mailing Address 10 S DEARBORN STREET 48TH FLOOR		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City State Zip Code CHICAGO IL 60603		<b>Transaction ID : 2014M04L11CPC00005</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00141218"/>		Amount of Each Receipt this Period <input type="text" value="15000.00"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="15000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. FREEDOM FUND</b>		Date of Receipt
Mailing Address 701 8TH STREET NW SUITE 500		<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City State Zip Code WASHINGTON DC 20001		<b>Transaction ID : 2014M04L11CPC00006</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00390674"/>		Amount of Each Receipt this Period <input type="text" value="15000.00"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="15000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="45000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 2543 OF 2949
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. HMS HOLDINGS CORP PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 360 PARK AVENUE SOUTH  
 City NEW YORK State NY Zip Code 10010  
 FEC ID number of contributing federal political committee. **C** C00440453  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L11CPC00007**  
 Amount of Each Receipt this Period  
 5000.00

**B. MCGUIRE WOODS FEDERAL PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address ONE JAMES CENTER  
 901 EAST CARY STREET  
 City RICHMOND State VA Zip Code 23219  
 FEC ID number of contributing federal political committee. **C** C00225342  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11CPC00008**  
 Amount of Each Receipt this Period  
 5000.00

**C. MICROSOFT CORPORATION PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16011 NE 36TH WAY  
 City REDMOND State WA Zip Code 98052  
 FEC ID number of contributing federal political committee. **C** C00227546  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11CPC00009**  
 Amount of Each Receipt this Period  
 15000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2545 OF 2949
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. NATIONAL AUTOMOBILE DEALERS ASSOCIATION PAC**

Mailing Address 412 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00040998**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L11CPC00013**

Amount of Each Receipt this Period  
 15000.00

Full Name (Last, First, Middle Initial)  
**B. POLITICAL ACTION COMMITTEE OF THE AAOS**

Mailing Address 317 MASSACHUSETTS AVENUE N.E.

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2014  
**Transaction ID : 2014M04L11CPC00014**

Amount of Each Receipt this Period  
 15000.00

Full Name (Last, First, Middle Initial)  
**C. PROSPERITY PAC**

Mailing Address 1006 PENDLETON STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00377689**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2014  
**Transaction ID : 2014M04L11CPC00015**

Amount of Each Receipt this Period  
 15000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2546 OF 2949
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. STRATEGY PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3048 SHOREWOOD DR  
City OSHKOSH State WI Zip Code 54901  
FEC ID number of contributing federal political committee. **C** C00497842  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 26 / 2014  
**Transaction ID : 2014M04L11CPC00016**  
Amount of Each Receipt this Period  
15000.00

**B. WAL PAC - WALMART**  
Full Name (Last, First, Middle Initial)  
Mailing Address 702 SW 8TH STREET  
City BENTONVILLE State AR Zip Code 72716  
FEC ID number of contributing federal political committee. **C** C00093054  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 24 / 2014  
**Transaction ID : 2014M04L11CPC00017**  
Amount of Each Receipt this Period  
15000.00

**C. 21ST CENTURY MAJORITY FUND**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6065 ROSWELL ROAD BOX 2274  
City ATLANTA State GA Zip Code 30328-4011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation REQUESTED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00001**  
Amount of Each Receipt this Period  
15000.00  
**[MEMO ITEM]**  
CONTRIBUTION MEMO OF SENATE BATTLEGROUND FUND JFC

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2547 OF 2949
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. CHAMBLISS FOR SENATE**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 12469

City ATLANTA	State GA	Zip Code 30355-2469
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation REQUESTED
------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : 2014M04L11JFCCT00010**

Amount of Each Receipt this Period  
12500.00

**[MEMO ITEM]**  
CONTRIBUTION MEMO OF SENATE  
BATTLEGROUND FUND JFC

**B. FLOWERS INDUSTRIES POLITICAL ACTION COMMITTEE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1919 FLOWERS CIRCLE

City THOMASVILLE	State GA	Zip Code 31757-1137
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation REQUESTED
------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : 2014M04L11JFCCT00017**

Amount of Each Receipt this Period  
12500.00

**[MEMO ITEM]**  
CONTRIBUTION MEMO OF SENATE  
BATTLEGROUND FUND JFC

**C. THE LOOSE GROUP**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 78034

City ATLANTA	State GA	Zip Code 30357-2034
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation REQUESTED
------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : 2014M04L11JFCCT00031**

Amount of Each Receipt this Period  
15000.00

**[MEMO ITEM]**  
CONTRIBUTION MEMO OF SENATE  
BATTLEGROUND FUND JFC

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2548 OF 2949
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. BILL PAC**

Mailing Address 228 S. WASHINGTON STREET #115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00039**

Amount of Each Receipt this Period  
15000.00

**[MEMO ITEM]**  
CONTRIBUTION MEMO OF HOUSE MAJORITY TRUST JFC

Full Name (Last, First, Middle Initial)  
**B. CONTINUING A MAJORITY PARTY ACTION COMMITTEE**

Mailing Address 5915 EASTMAN AVENUE SUITE 100

City MIDLAND State MI Zip Code 48640-6824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00040**

Amount of Each Receipt this Period  
15000.00

**[MEMO ITEM]**  
CONTRIBUTION MEMO OF HOUSE MAJORITY TRUST JFC

Full Name (Last, First, Middle Initial)  
**C. GREGGPAC**

Mailing Address 120 NORTH CONGRESS STREET SUITE 300

City JACKSON State MS Zip Code 39201-2685

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 6500.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : 2014M04L11JFCCT00041**

Amount of Each Receipt this Period  
6500.00

**[MEMO ITEM]**  
CONTRIBUTION MEMO OF HOUSE MAJORITY TRUST JFC

**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 2549 OF 2949
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. HEALTHCARE FREEDOM FUND**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 2485

City SPRINGFIELD	State VA	Zip Code 22152-0485
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation REQUESTED
------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : 2014M04L11JFCCT00042**

Amount of Each Receipt this Period  
32400.00

**[MEMO ITEM]**  
CONTRIBUTION MEMO OF HOUSE MAJORITY TRUST JFC

**B. THE GOOD FUND**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 3404

City ALEXANDRIA	State VA	Zip Code 22302-0404
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation REQUESTED
------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
30000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : 2014M04L11JFCCT00043**

Amount of Each Receipt this Period  
15000.00

**[MEMO ITEM]**  
CONTRIBUTION MEMO OF HOUSE MAJORITY TRUST JFC

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	227500.00

**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 2550 OF 2949
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. HOUSE MAJORITY TRUST**  
Full Name (Last, First, Middle Initial)  
Mailing Address 228 S. WASHINGTON STREET  
SUITE 115  
City ALEXANDRIA State VA Zip Code 22314  
FEC ID number of contributing federal political committee. **C** C00480061  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 115661.18

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014  
**Transaction ID : 2014M04L12TA00001**  
Amount of Each Receipt this Period  
40073.38

**B. HOUSE MAJORITY TRUST**  
Full Name (Last, First, Middle Initial)  
Mailing Address 228 S. WASHINGTON STREET  
SUITE 115  
City ALEXANDRIA State VA Zip Code 22314  
FEC ID number of contributing federal political committee. **C** C00480061  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 115661.18

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014  
**Transaction ID : 2014M04L12TA00002**  
Amount of Each Receipt this Period  
35522.01

**C. MASSACHUSETTS VICTORY JFC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 138 CONANT STREET  
City BEVERLY State MA Zip Code 01915  
FEC ID number of contributing federal political committee. **C** C00549782  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 108243.32

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 05 / 2014  
**Transaction ID : 2014M04L12TA00003**  
Amount of Each Receipt this Period  
71012.52

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	146607.91
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2551 OF 2949
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. MASSACHUSETTS VICTORY JFC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 138 CONANT STREET  
 City BEVERLY State MA Zip Code 01915  
 FEC ID number of contributing federal political committee. **C** C00549782  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 108243.32

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L12TA00004**  
 Amount of Each Receipt this Period  
 37230.80

**B. SENATE BATTLEGROUND FUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 228 S. WASHINGTON STREET  
 SUITE 115  
 City ALEXANDRIA State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C** C00557033  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 327931.72

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L12TA00005**  
 Amount of Each Receipt this Period  
 307181.72

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	344412.52
<b>TOTAL</b> This Period (last page this line number only).....▶	491020.43

**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 2552 OF 2949
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. UNITED STATES POSTAL SERVICE**

Mailing Address 2825 LONE PARKWAY

City EAGAN State MN Zip Code 55121-9640

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
17900.05

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014  
**Transaction ID : 2014M04L1500001**

Amount of Each Receipt this Period  
3141.96

REFUND-POSTAGE

Full Name (Last, First, Middle Initial)  
**B. WASHINGTON STATE REPUBLICAN PARTY**

Mailing Address 11811 NE 1ST STREET  
SUITE A306

City BELLEVUE State WA Zip Code 98005

FEC ID number of contributing federal political committee. **C** C00031088

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : 2014M04L1500002**

Amount of Each Receipt this Period  
350.00

REGISTRATION FEE

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3491.96
<b>TOTAL</b> This Period (last page this line number only).....▶	3491.96

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2553 OF 2949
<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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. PATRICIA RIVERS ESTEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3051 ARABIAN ROAD  
 City LAS VEGAS State NV Zip Code 89107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF - EMPLOYED Occupation RESTAURATEUR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L17OR0001**  
 Amount of Each Receipt this Period 32400.00  
 POST ELECTION RECOUNT FUND CONTRIBUTION

**B. CRAIG ESTEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3051 ARABIAN ROAD  
 City LAS VEGAS State NV Zip Code 89107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NV RESTAURANT SERVICES Occupation MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 32400.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L17OR0002**  
 Amount of Each Receipt this Period 32400.00  
 POST ELECTION RECOUNT FUND CONTRIBUTION

**C. DIRK EYMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 310 FIRST STREET SE  
 City WASHINGTON State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REPUBLICAN NATIONAL COMMITTEE Occupation I.T. DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4400.00

Date of Receipt 03 / 12 / 2014  
**Transaction ID : 2014M04L17OR00003**  
 Amount of Each Receipt this Period 600.00  
 POST ELECTION RECOUNT FUND CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	65400.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2554 OF 2949
<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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. DIRK EYMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer REPUBLICAN NATIONAL COMMITTEE Occupation I.T. DIRECTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4400.00

Date of Receipt 03 / 24 / 2014  
**Transaction ID : 2014M04L17OR00004**

Amount of Each Receipt this Period 2000.00

POST ELECTION RECOUNT FUND CONTRIBUTION

**B. DIANE M. HENDRICKS**  
Full Name (Last, First, Middle Initial)

Mailing Address 4007 EAU CLAIRE ROAD

City AFTON State WI Zip Code 53501

FEC ID number of contributing federal political committee. **C**

Name of Employer HENDRICKS HOLDING COMPANY Occupation OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 32400.00

Date of Receipt 03 / 17 / 2014  
**Transaction ID : 2014M04L17OR00005**

Amount of Each Receipt this Period 32400.00

POST ELECTION RECOUNT FUND CONTRIBUTION

**C. HOWARD H. LEACH**  
Full Name (Last, First, Middle Initial)

Mailing Address 350 ROYAL PALM WAY SUITE 401

City PALM BEACH State FL Zip Code 33480

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PRIVATE INVESTMENTS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 32400.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : 2014M04L17OR00006**

Amount of Each Receipt this Period 32400.00

POST ELECTION RECOUNT FUND CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	66800.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2555 OF 2949
<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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. EARLE I. MACK**  
Full Name (Last, First, Middle Initial)

Mailing Address 2115 LINWOOD AVENUE  
SUITE 110

City State Zip Code  
FORT LEE NJ 07024

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
THE MACK COMPANY SENIOR PARTNER

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  
03 / 12 / 2014  
**Transaction ID : 2014M04L17OR00007**

Amount of Each Receipt this Period  
  
POST ELECTION RECOUNT FUND CONTRIBUTION

**B. BENJAMIN OTTENHOFF**  
Full Name (Last, First, Middle Initial)

Mailing Address 310 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
REPUBLICAN NATIONAL COMMITTEE C.F.O.

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  
03 / 21 / 2014  
**Transaction ID : 2014M04L17OR00008**

Amount of Each Receipt this Period  
  
POST ELECTION RECOUNT FUND CONTRIBUTION

**C. BENJAMIN OTTENHOFF**  
Full Name (Last, First, Middle Initial)

Mailing Address 310 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
REPUBLICAN NATIONAL COMMITTEE C.F.O.

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  
03 / 25 / 2014  
**Transaction ID : 2014M04L17OR00009**

Amount of Each Receipt this Period  
  
POST ELECTION RECOUNT FUND CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="27050.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 2556 OF 2949
<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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. CHARLES R. SCHWAB**  
Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 192861

City SAN FRANCISCO State CA Zip Code 94119

FEC ID number of contributing federal political committee. **C**

Name of Employer CHARLES SCHWAB CORPORATION Occupation C.E.O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L17OR00010**

Amount of Each Receipt this Period  
 32400.00

POST ELECTION RECOUNT FUND CONTRIBUTION

**B. PAUL SINGER**  
Full Name (Last, First, Middle Initial)

Mailing Address 40 W. 57TH STREET  
30TH FLOOR

City NEW YORK State NY Zip Code 10019

FEC ID number of contributing federal political committee. **C**

Name of Employer ELLIOTT MANAGEMENT Occupation C. E. O.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L17OR00011**

Amount of Each Receipt this Period  
 32400.00

POST ELECTION RECOUNT FUND CONTRIBUTION

**C. MICHAEL K. VLOCK**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 THIMBLE ISLAND DRIVE

City BRANFORD State CT Zip Code 06405

FEC ID number of contributing federal political committee. **C**

Name of Employer CRITTALL WINDOWS Occupation PRIVATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L17OR00012**

Amount of Each Receipt this Period  
 32400.00

POST ELECTION RECOUNT FUND CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	97200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 2557 OF 2949
<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)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. RICHARD L. WILKEY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5112 N. HIGHWAY 83

City HARTLAND	State WI	Zip Code 53029
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FISHER BARTON INC.	Occupation CEO
--	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L17OR00013**

Amount of Each Receipt this Period  
 100.00

POST ELECTION RECOUNT FUND CONTRIBUTION

**B. SUSAN WILKEY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5112 STATE ROAD 83

City HARTLAND	State WI	Zip Code 53029
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation HOMEMAKER
------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : 2014M04L17OR00014**

Amount of Each Receipt this Period  
 100.00

POST ELECTION RECOUNT FUND CONTRIBUTION

**C. REPUBLICAN NATIONAL COMMITTEE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 310 FIRST STREET SE  
RECOUNT ACCOUNT

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
117982.45

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : 2014M04L17OR00015**

Amount of Each Receipt this Period  
 29930.07

RECOUNT LEGAL AND COMPLIANCE SERVICES

**[MEMO ITEM]**  
 TRANSFER OF EXPENSES REIMBURSEMENT FOR ALLOCATED STAFF SALARIES AND BENEFITS PER AO 2010-14

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	256650.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ABC BURGLAR ALARM SYSTEMS INC**

Mailing Address PO BOX 189

City ORLAND PARK State IL Zip Code 60462

Purpose of Disbursement  
BUILDING MAINTENANCE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00001

Amount of Each Disbursement this Period

242.32

Full Name (Last, First, Middle Initial)

**B. ADP INC**

Mailing Address PO BOX 842875

City BOSTON State MA Zip Code 02284

Purpose of Disbursement  
PAYROLL SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00002

Amount of Each Disbursement this Period

2403.71

Full Name (Last, First, Middle Initial)

**C. ADP INC**

Mailing Address PO BOX 842875

City BOSTON State MA Zip Code 02284

Purpose of Disbursement  
PAYROLL SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00003

Amount of Each Disbursement this Period

1100.26

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3746.29

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ADP INC**

Mailing Address PO BOX 842875

City BOSTON State MA Zip Code 02284

Purpose of Disbursement  
PAYROLL SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00004

Amount of Each Disbursement this Period

1400.53

Full Name (Last, First, Middle Initial)

**B. ADP INC.**

Mailing Address P O BOX 842875

City BOSTON State MA Zip Code 02284-2875

Purpose of Disbursement  
PAYROLL SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : 2014M04L21A00005

Amount of Each Disbursement this Period

440.13

Full Name (Last, First, Middle Initial)

**C. ALASKA COMMUNICATIONS SYSTEMS**

Mailing Address PO BOX 196666

City ANCHORAGE State AK Zip Code 99519

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00006

Amount of Each Disbursement this Period

129.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1969.66

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ALASKA COMMUNICATIONS SYSTEMS**

Mailing Address PO BOX 196666

City ANCHORAGE State AK Zip Code 99519

Purpose of Disbursement  
CABLE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00007

Amount of Each Disbursement this Period

337.48

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS-CR CARD FEES**

Mailing Address P O BOX 981532

City EL PASO State TX Zip Code 79998

Purpose of Disbursement  
REVENUE PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21A00008

Amount of Each Disbursement this Period

25298.04

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS-CR CARD FEES**

Mailing Address P O BOX 981532

City EL PASO State TX Zip Code 79998

Purpose of Disbursement  
REVENUE PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21A00009

Amount of Each Disbursement this Period

2057.38

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

27692.90

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BAAN O YEEL KON CORPORATION**

Mailing Address PO BOX 74381

City FAIRBANKS State AK Zip Code 99707

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00010

Amount of Each Disbursement this Period

745.25

Full Name (Last, First, Middle Initial)

**B. ANDY BARKETT**

Mailing Address 710 MADISON AVE

City REDWOOD CITY State CA Zip Code 94061

Purpose of Disbursement  
IT SUPPORT/MAINTENANCE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00011

Amount of Each Disbursement this Period

3524.07

Full Name (Last, First, Middle Initial)

**C. AMAZON WEB SERVICES**

Mailing Address 1200 12TH AVE S.  
STE 1200

City SEATTLE State WA Zip Code 98144

Purpose of Disbursement  
IT SUPPORT/MAINTENANCE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00011M

Amount of Each Disbursement this Period

3524.07

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4269.32

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. ANDY BARKETT**

Date of Disbursement: MM / DD / YYYY  
03 / 12 / 2014

Mailing Address 710 MADISON AVE

City REDWOOD CITY State CA Zip Code 94061

Purpose of Disbursement: MANAGEMENT CONSULTING SERVICES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID : 2014M04L21A00012

Amount of Each Disbursement this Period: 33333.32

Full Name (Last, First, Middle Initial)  
**B. JONATHAN BARNETT**

Date of Disbursement: MM / DD / YYYY  
03 / 19 / 2014

Mailing Address 604 HICKORY LANE

City SILOAM SPRINGS State AR Zip Code 72761

Purpose of Disbursement: TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID : 2014M04L21A00013

Amount of Each Disbursement this Period: 505.00

Full Name (Last, First, Middle Initial)  
**C. DELTA AIRLINES**

Date of Disbursement: MM / DD / YYYY  
03 / 19 / 2014

Mailing Address 1629 K ST NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement: TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID : 2014M04L21A00013M

Amount of Each Disbursement this Period: 505.00

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 33838.32

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BB & T FINANCIAL FSB**

Mailing Address PO BOX 580340

City CHARLOTTE State NC Zip Code 28258

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	4			2	0	1	4		

Transaction ID : 2014M04L21A00014

Amount of Each Disbursement this Period

1	2	4	7	1	6	3
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. COSI WASHINGTON DC**

Mailing Address 301 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CATERING/FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	4			2	0	1	4		

Transaction ID : 2014M04L21A00014M

Amount of Each Disbursement this Period

1	2	6
---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. QDOBA - WDC**

Mailing Address 555 11TH ST, NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement  
CATERING/FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	4			2	0	1	4		

Transaction ID : 2014M04L21A00015M

Amount of Each Disbursement this Period

2	3	1	9	3
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[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1	2	4	7	1	6	3
---	---	---	---	---	---	---

1	2	6
---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. US POSTMASTER -WASHINGTON DC**

Mailing Address 900 BRENTWOOD RD NE

City WASHINGTON State DC Zip Code 20066

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. SAVOYA**

Mailing Address 1845 WOODALL RODGERS FREEWAY  
SUITE 1725

City DALLAS State TX Zip Code 75201

Purpose of Disbursement  
TRANSPORTATION SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. BRAT STOP**

Mailing Address 12304 75TH ST

City KENOSHA State WI Zip Code 53142

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	4			2	0	1	4		

Transaction ID : 2014M04L21A00017M

Amount of Each Disbursement this Period

5	.	6	8
---	---	---	---

[MEMO ITEM]

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	4			2	0	1	4		

Transaction ID : 2014M04L21A00018M

Amount of Each Disbursement this Period

1	0	0	1	3	.	1	6
---	---	---	---	---	---	---	---

[MEMO ITEM]

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	4			2	0	1	4		

Transaction ID : 2014M04L21A00019M

Amount of Each Disbursement this Period

3	2	.	5	9
---	---	---	---	---

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0	.	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CVS PHARMACY - WDC**

Mailing Address 1100 NEW JERSEY AVE, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : 2014M04L21A00020M

Amount of Each Disbursement this Period

22.63
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CVS PHARMACY WDC**

Mailing Address 661 PENN AVE SE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : 2014M04L21A00021M

Amount of Each Disbursement this Period

4.22
------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. GRAND OYSTER BAR**

Mailing Address NEWARK LIBERTY INTERNATIONAL AIRPO

City NEWARK State NJ Zip Code 07114

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : 2014M04L21A00022M

Amount of Each Disbursement this Period

43.99
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[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00
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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MARRIOTT - DFW**

Mailing Address 8440 FREEPORT PARKWAY

City IRVING State TX Zip Code 75063

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21A00023M

Amount of Each Disbursement this Period

1281.34

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. MARRIOTT - RACINE**

Mailing Address 7111 WASHINGTON AVE (HWY 20)

City RACINE State WI Zip Code 53406

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21A00024M

Amount of Each Disbursement this Period

513.36

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. MI COCINA - DALLAS**

Mailing Address 77 HIGHLAND PARK VILLAGE

City DALLAS State TX Zip Code 75205

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21A00025M

Amount of Each Disbursement this Period

50.60

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MILWAUKEE ATHLETIC CLUB**

Mailing Address 758 N. BROADWAY

City MILWAUKEE State WI Zip Code 53202

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2014

Transaction ID : 2014M04L21A00026M

Amount of Each Disbursement this Period

43.30
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. SPLASH CAR WASH**

Mailing Address 10 I STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2014

Transaction ID : 2014M04L21A00027M

Amount of Each Disbursement this Period

21.00
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. THE PFISTER**

Mailing Address 424 E WISCONSIN AVENUE

City MILWAUKEE State WI Zip Code 53202

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2014

Transaction ID : 2014M04L21A00028M

Amount of Each Disbursement this Period

77.73
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[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00
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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AMAZON.COM**

Mailing Address P O BOX 81226

City SEATTLE State WA Zip Code 98108

Purpose of Disbursement  
VENDOR CREDIT

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2014

Transaction ID : 2014M04L21A00029M

Amount of Each Disbursement this Period

-13.77
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. MACNAIR TRAVEL MANAGEMENT**

Mailing Address 1101 KING ST  
SUITE 190

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
VENDOR CREDIT

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2014

Transaction ID : 2014M04L21A00030M

Amount of Each Disbursement this Period

-40.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. BB&T BANK**

Mailing Address 1909 K STREET NW  
2ND FLOOR

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	04	/	2014

Transaction ID : 2014M04L21A00031

Amount of Each Disbursement this Period

261600.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

261600.00
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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BIGGEST LITTLE DESIGN LLC**

Mailing Address 47-39 40TH STREET #1E

City SUNNYSIDE State NY Zip Code 11104

Purpose of Disbursement  
PRINTING/GRAPHIC SERVICES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	12	/	2014

Transaction ID : 2014M04L21A00032

Amount of Each Disbursement this Period

950.00
--------

Full Name (Last, First, Middle Initial)

**B. BLUEPRINT COMMUNICATIONS**

Mailing Address 127 S. PEYTON STREET  
SUITE 200

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement  
POLITICAL STRATEGY SERVICES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	05	/	2014

Transaction ID : 2014M04L21A00033

Amount of Each Disbursement this Period

7000.00
---------

Full Name (Last, First, Middle Initial)

**C. THE BOPP LAW FIRM**

Mailing Address 1 SOUTH SIXTH STREET

City TERRE HAUTE State IN Zip Code 47807

Purpose of Disbursement  
LEGAL AND COMPLIANCE SERVICES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	19	/	2014

Transaction ID : 2014M04L21A00034

Amount of Each Disbursement this Period

754.90
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8704.90
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. THE BOPP LAW FIRM**

Mailing Address 1 SOUTH SIXTH STREET

City TERRE HAUTE State IN Zip Code 47807

Purpose of Disbursement  
TRAVEL EXPENSES

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
0	3		2	6		2	0	1	4

Transaction ID : 2014M04L21A00035

Amount of Each Disbursement this Period

1	3	9	4	.	8	5
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. BORGER MANAGEMENT INC**

Mailing Address 110 D STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
RENT

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
0	3		0	4		2	0	1	4

Transaction ID : 2014M04L21A00036

Amount of Each Disbursement this Period

2	0	5	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. BOREL ESTATE COMPANY**

Mailing Address 1700 S. EL CAMINO REAL

City SAN MATEO State CA Zip Code 94402

Purpose of Disbursement  
RENT

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
0	3		0	4		2	0	1	4

Transaction ID : 2014M04L21A00037

Amount of Each Disbursement this Period

6	2	8	6	.	0	0
---	---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

9	7	3	0	.	8	5
---	---	---	---	---	---	---

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BOWIE'S INC,**

Mailing Address 1337 E STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
BUILDING MAINTENANCE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	1	4

Transaction ID : 2014M04L21A00038

Amount of Each Disbursement this Period

1	3	7	6
---	---	---	---

Full Name (Last, First, Middle Initial)

**B. BOZZUTO MANAGEMENT**

Mailing Address 70 I STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
RENT

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	1	4

Transaction ID : 2014M04L21A00039

Amount of Each Disbursement this Period

4	1	8	0
---	---	---	---

Full Name (Last, First, Middle Initial)

**C. BRANCH BANKING & TRUST**

Mailing Address 1909 K STREET NW  
2ND FLOOR

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement  
REVENUE PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

Transaction ID : 2014M04L21A00040

Amount of Each Disbursement this Period

6	7	7	6
---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1	3	1	3	6	6
---	---	---	---	---	---

1	3	1	3	6	6
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BRIGHTROLL INC**

Mailing Address PO BOX 8420

City PASADENA State CA Zip Code 91109

Purpose of Disbursement  
MEDIA SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	4

Transaction ID : 2014M04L21A00041

Amount of Each Disbursement this Period

3	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. ELIZABETH BRITT**

Mailing Address 1204 MOSELLE COURT

City LAS VEGAS State NV Zip Code 89144

Purpose of Disbursement  
POLITICAL STRATEGY SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	1	4

Transaction ID : 2014M04L21A00042

Amount of Each Disbursement this Period

3	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. ELIZABETH BRITT**

Mailing Address 1204 MOSELLE COURT

City LAS VEGAS State NV Zip Code 89144

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	1	4

Transaction ID : 2014M04L21A00043

Amount of Each Disbursement this Period

2	6	.	3	9
---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7	0	2	6	.	3	9
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CATERING/FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00044

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CATERING/FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00045

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CATERING/FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00046

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CAUSEWAY SOLUTIONS LLC**

Mailing Address PO BOX 9114

City METAIRIE State LA Zip Code 70055

Purpose of Disbursement  
MANAGEMENT CONSULTING SERVICES

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
0	3		1	2		2	0	1	4

Transaction ID : 2014M04L21A00047

Amount of Each Disbursement this Period

6	2	5	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. C & C CLEANING SERVICE INC**

Mailing Address PO BOX 3962

City MERRIFIELD State VA Zip Code 22116

Purpose of Disbursement  
JANITORIAL SERVICES

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
0	3		1	2		2	0	1	4

Transaction ID : 2014M04L21A00048

Amount of Each Disbursement this Period

1	1	6	5	3	9	9	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. CHAPEL VALLEY LANDSCAPE**

Mailing Address PO BOX 159

City WOODBINE State MD Zip Code 21797

Purpose of Disbursement  
BUILDING 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
0	3		1	9		2	0	1	4

Transaction ID : 2014M04L21A00049

Amount of Each Disbursement this Period

5	3	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1	8	4	3	3	9	9	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CHAPIN RESIDENTIAL &**

Mailing Address COMMERCIAL LLC  
9101 WARFIELD ROAD

City GAITHERSBURG State MD Zip Code 20882

Purpose of Disbursement  
BUILDING MAINTENANCE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00050

Amount of Each Disbursement this Period

18120.80

Full Name (Last, First, Middle Initial)

**B. CGLIC/ CHLIC**

Mailing Address PO BOX 644546

City PITTSBURGH State PA Zip Code 15264

Purpose of Disbursement  
INSURANCE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 05 / 2014

Transaction ID : 2014M04L21A00051

Amount of Each Disbursement this Period

7412.12

Full Name (Last, First, Middle Initial)

**C. CGLIC/ CHLIC**

Mailing Address PO BOX 644546

City PITTSBURGH State PA Zip Code 15264

Purpose of Disbursement  
INSURANCE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00052

Amount of Each Disbursement this Period

108256.74

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

133789.66

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CIGNA GROUP INSURANCE**

Mailing Address LINA  
PO BOX 13701

City PHILADELPHIA State PA Zip Code 19101

Purpose of Disbursement  
INSURANCE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00053

Amount of Each Disbursement this Period

5589.86

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00054

Amount of Each Disbursement this Period

350.00

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00055

Amount of Each Disbursement this Period

94847.23

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

100787.09

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00056

Amount of Each Disbursement this Period

931.10

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 26 / 2014

Transaction ID : 2014M04L21A00057

Amount of Each Disbursement this Period

14507.51

Full Name (Last, First, Middle Initial)

**C. COMCAST**

Mailing Address PO BOX 3005

City SOUTHEASTERN State PA Zip Code 19398

Purpose of Disbursement  
CABLE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00058

Amount of Each Disbursement this Period

329.95

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

15768.56

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COMCAST**

Mailing Address PO BOX 3005

City SOUTHEASTERN State PA Zip Code 19398

Purpose of Disbursement  
CABLE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00059

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. COMCAST**

Mailing Address PO BOX 3005

City SOUTHEASTERN State PA Zip Code 19398

Purpose of Disbursement  
CABLE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00060

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. COMCAST**

Mailing Address PO BOX 3005

City SOUTHEASTERN State PA Zip Code 19398

Purpose of Disbursement  
CABLE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00061

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COMCAST**

Mailing Address PO BOX 34227

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement  
CABLE SERVICES

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
0	3		1	2		2	0	1	4

**Transaction ID : 2014M04L21A00062**

Amount of Each Disbursement this Period

3	1	3	5	5
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS CORPORATION**

Mailing Address OF AMERICA  
13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement  
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
0	3		0	4		2	0	1	4

**Transaction ID : 2014M04L21A00063**

Amount of Each Disbursement this Period

1	3	2	0	1	4	7	1
---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS CORPORATION**

Mailing Address OF AMERICA  
13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

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
0	3		0	5		2	0	1	4

**Transaction ID : 2014M04L21A00064**

Amount of Each Disbursement this Period

3	1	7	1	6	1	5	7
---	---	---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4	4	9	8	9	8	3
---	---	---	---	---	---	---

--	--	--	--	--	--	--	--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS CORPORATION**

Mailing Address OF AMERICA  
13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

Transaction ID : 2014M04L21A00065

Amount of Each Disbursement this Period

220.00

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS CORPORATION**

Mailing Address OF AMERICA  
13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00066

Amount of Each Disbursement this Period

29303.24

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS CORPORATION**

Mailing Address OF AMERICA  
13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 13 / 2014

Transaction ID : 2014M04L21A00067

Amount of Each Disbursement this Period

60530.07

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

90053.31

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS CORPORATION**

Mailing Address OF AMERICA  
13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00068

Amount of Each Disbursement this Period

82380.21

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS CORPORATION**

Mailing Address OF AMERICA  
13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00069

Amount of Each Disbursement this Period

112063.22

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS CORPORATION**

Mailing Address OF AMERICA  
13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014

Transaction ID : 2014M04L21A00070

Amount of Each Disbursement this Period

34565.94

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

229009.37

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS CORPORATION**

Mailing Address OF AMERICA  
13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 26 / 2014

Transaction ID : 2014M04L21A00071

Amount of Each Disbursement this Period

28535.78

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS CORPORATION**

Mailing Address OF AMERICA  
13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 26 / 2014

Transaction ID : 2014M04L21A00072

Amount of Each Disbursement this Period

233042.65

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS CORPORATION**

Mailing Address OF AMERICA  
13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2014

Transaction ID : 2014M04L21A00073

Amount of Each Disbursement this Period

10791.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

272369.43

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS CORPORATION**

Mailing Address OF AMERICA  
13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 2014M04L21A00074

Amount of Each Disbursement this Period

54227.20
----------

Full Name (Last, First, Middle Initial)

**B. COMMUNICATIONS CORPORATION**

Mailing Address OF AMERICA  
13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 2014M04L21A00075

Amount of Each Disbursement this Period

17565.82
----------

Full Name (Last, First, Middle Initial)

**C. COMMUNICATIONS CORPORATION**

Mailing Address OF AMERICA  
13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 2014M04L21A00076

Amount of Each Disbursement this Period

33809.46
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

105602.48
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COMMUNICATIONS CORPORATION**

Mailing Address OF AMERICA  
13195 FREEDOM WAY

City BOSTON State VA Zip Code 22713

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 03 / 2014

Transaction ID : 2014M04L21A00077

Amount of Each Disbursement this Period

164733.63

Full Name (Last, First, Middle Initial)

**B. COMPANY FLOWERS**

Mailing Address 2107 N. POLLARD STREET

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement  
FLORAL ARRANGEMENTS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00078

Amount of Each Disbursement this Period

89.57

Full Name (Last, First, Middle Initial)

**C. CONGRESSIONAL ATHLETIC**

Mailing Address ASSOC.  
1322 15TH ST NW APT B1

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
REGISTRATION FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00079

Amount of Each Disbursement this Period

480.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

165303.20

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. THE CONVENTION STORE,LLC**

Mailing Address 405 HEADQUARTERS DR  
SUITE 7

City MILLERSVILLE State MD Zip Code 21108

Purpose of Disbursement  
TRANSPORTATION SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 05 / 2014

Transaction ID : 2014M04L21A00080

Amount of Each Disbursement this Period

10140.00

Full Name (Last, First, Middle Initial)

**B. THE CONVENTION STORE,LLC**

Mailing Address 405 HEADQUARTERS DR  
SUITE 7

City MILLERSVILLE State MD Zip Code 21108

Purpose of Disbursement  
TRANSPORTATION SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00081

Amount of Each Disbursement this Period

1585.00

Full Name (Last, First, Middle Initial)

**C. CORELOGIC SPATIAL SOLUTIONS**

Mailing Address ATTENTION: SS  
PO BOX 202351

City DALLAS State TX Zip Code 75320

Purpose of Disbursement  
IT SUPPORT/MAINTENANCE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00082

Amount of Each Disbursement this Period

58500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

70225.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COTHRAN DEVELOPMENT STRATEGIES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		05		2014

Mailing Address INC  
2313 NORTH BROADWAY AVE

**Transaction ID : 2014M04L21A00083**

City ADA State OK Zip Code 74820

Amount of Each Disbursement this Period

5264.00
---------

Purpose of Disbursement  
FUNDRAISING SERVICES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. COTHRAN DEVELOPMENT STRATEGIES**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		05		2014

Mailing Address INC  
2313 NORTH BROADWAY AVE

**Transaction ID : 2014M04L21A00084**

City ADA State OK Zip Code 74820

Amount of Each Disbursement this Period

372.17
--------

Purpose of Disbursement  
TRAVEL EXPENSES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. CUBESMART LP**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2014

Mailing Address CUBESMART #594  
175 R ST, NE

**Transaction ID : 2014M04L21A00085**

City WASHINGTON State DC Zip Code 20002

Amount of Each Disbursement this Period

1238.30
---------

Purpose of Disbursement  
STORAGE SERVICES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

6874.47
---------

**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CWPS INC.**

Mailing Address PO BOX 37567

City State Zip Code  
BALTIMORE MD 21297

Purpose of Disbursement  
COMPUTER EQUIPMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

**Transaction ID : 2014M04L21A00086**

Amount of Each Disbursement this Period

18727.90

Full Name (Last, First, Middle Initial)

**B. SHARON DAY**

Mailing Address 310 First Street SE

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2014

**Transaction ID : 2014M04L21A00087**

Amount of Each Disbursement this Period

-50.00

Full Name (Last, First, Middle Initial)

**C. SHARON DAY**

Mailing Address 310 First Street SE

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2014

**Transaction ID : 2014M04L21A00088**

Amount of Each Disbursement this Period

50.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

18727.90

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. D.C. TREASURER**

Mailing Address PO BOX 98095

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00089

Amount of Each Disbursement this Period

5400.00

Full Name (Last, First, Middle Initial)

**B. D.C. TREASURER**

Mailing Address PO BOX 98095

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : 2014M04L21A00090

Amount of Each Disbursement this Period

76320.00

Full Name (Last, First, Middle Initial)

**C. D.C. WATER & SEWER AUTHORITY**

Mailing Address CUSTOMER SERVICE DEPT.  
PO BOX 97200

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : 2014M04L21A00091

Amount of Each Disbursement this Period

2166.98

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

83886.98



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DOUG COULTER PHOTOGRAPHY**

Mailing Address 1415 HORSESHOE CREEK LANE

City State Zip Code  
CUMMINGS GA 30041

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

Transaction ID : 2014M04L21A00095

Amount of Each Disbursement this Period

685.36

Full Name (Last, First, Middle Initial)

**B. DOUG COULTER PHOTOGRAPHY**

Mailing Address 1415 HORSESHOE CREEK LANE

City State Zip Code  
CUMMINGS GA 30041

Purpose of Disbursement  
PHOTOGRAPHY SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

Transaction ID : 2014M04L21A00096

Amount of Each Disbursement this Period

3829.00

Full Name (Last, First, Middle Initial)

**C. DRINK MORE DELIVERY INC**

Mailing Address 7595 A RICKENBACKER DRIVE

City State Zip Code  
GAITHERSBURG MD 20879

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  
03 / 12 / 2014

Transaction ID : 2014M04L21A00097

Amount of Each Disbursement this Period

685.36

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

685.36

685.36

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DTG OPERATIONS INC-BOK**

Mailing Address **THRIFTY CAR RENTAL  
LOCKBOX 2241**

City **TULSA** State **OK** Zip Code **74182**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	12	/	2014

**Transaction ID : 2014M04L21A00098**

Amount of Each Disbursement this Period

307.23
--------

Full Name (Last, First, Middle Initial)

**B. DUPLI ENVELOPE & GRAPHICS CORP**

Mailing Address **PO BOX 11500**

City **SYRACUSE** State **NY** Zip Code **13218**

Purpose of Disbursement  
**PRINTING/GRAPHIC SERVICES**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	19	/	2014

**Transaction ID : 2014M04L21A00099**

Amount of Each Disbursement this Period

19120.00
----------

Full Name (Last, First, Middle Initial)

**C. EAN SERVICES. LLC**

Mailing Address **PO BOX 402334**

City **ATLANTA** State **GA** Zip Code **30384**

Purpose of Disbursement  
**TRAVEL EXPENSES**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	12	/	2014

**Transaction ID : 2014M04L21A00100**

Amount of Each Disbursement this Period

766.53
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

20193.76
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ELAVON**

Mailing Address ONE CONCOURSE PKY  
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
REVENUE PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00101

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. ELAVON**

Mailing Address ONE CONCOURSE PKY  
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
REVENUE PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00102

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ELAVON**

Mailing Address ONE CONCOURSE PKY  
SUITE 300

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
REVENUE PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00103

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. EVENT MARKETING & PROMOTIONS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Mailing Address 1310 N. CHICKASAW TRAIL

**Transaction ID : 2014M04L21A00104**

City State Zip Code  
ORLANDO FL 32825

Amount of Each Disbursement this Period

1500.00
---------

Purpose of Disbursement  
REGISTRATION FEES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. FED EX**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		05		2014

Mailing Address P O BOX 371461

**Transaction ID : 2014M04L21A00105**

City State Zip Code  
PITTSBURGH PA 15250

Amount of Each Disbursement this Period

470.97
--------

Purpose of Disbursement  
DELIVERY SERVICES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. FED EX**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2014

Mailing Address P O BOX 371461

**Transaction ID : 2014M04L21A00106**

City State Zip Code  
PITTSBURGH PA 15250

Amount of Each Disbursement this Period

446.02
--------

Purpose of Disbursement  
DELIVERY SERVICES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

2416.99
---------

**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FED EX**

Mailing Address P O BOX 371461

City State Zip Code  
PITTSBURGH PA 15250

Purpose of Disbursement  
DELIVERY SERVICES

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
0	3		1	9		2	0	1	4

Transaction ID : 2014M04L21A00107

Amount of Each Disbursement this Period

3	5	3	.	6	6
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. FED EX**

Mailing Address P O BOX 371461

City State Zip Code  
PITTSBURGH PA 15250

Purpose of Disbursement  
DELIVERY SERVICES

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
0	3		2	6		2	0	1	4

Transaction ID : 2014M04L21A00108

Amount of Each Disbursement this Period

4	8	9	.	7	2
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. FIELD VISION LLC**

Mailing Address 3 SOUTH HADDON AVE

City State Zip Code  
HADDONFIELD NJ 08033

Purpose of Disbursement  
POLITICAL STRATEGY SERVICES

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
0	3		1	2		2	0	1	4

Transaction ID : 2014M04L21A00109

Amount of Each Disbursement this Period

6	6	6	.	6	0
---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7	5	0	.	9	3	8
---	---	---	---	---	---	---

7	5	0	.	9	3	8
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FIRST INSURANCE FUNDING CORP.**

Mailing Address PO BOX 66468

City CHICAGO State IL Zip Code 60666-0468

Purpose of Disbursement  
INSURANCE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00110

Amount of Each Disbursement this Period

23732.65

Full Name (Last, First, Middle Initial)

**B. FLS CONNECT LLC**

Mailing Address 7300 HUDSON BLVD  
SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00111

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. FLS CONNECT LLC**

Mailing Address 7300 HUDSON BLVD  
SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement  
TELEMARKETING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00112

Amount of Each Disbursement this Period

64157.90

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

89890.55

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FLS CONNECT LLC**

Mailing Address 7300 HUDSON BLVD  
SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00113

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. FLS CONNECT LLC**

Mailing Address 7300 HUDSON BLVD  
SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement  
TELEMARKETING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00114

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. FLS CONNECT LLC**

Mailing Address 7300 HUDSON BLVD  
SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement  
TELEMARKETING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00115

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FLS CONNECT LLC**

Mailing Address 7300 HUDSON BLVD  
SUITE 270

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement  
TELEMARKETING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
03 / 26 / 2014

Transaction ID : 2014M04L21A00116

Amount of Each Disbursement this Period

59414.35

Full Name (Last, First, Middle Initial)

**B. FLS CONNECT LLC**

Mailing Address 7300 HUDSON BLVD  
SUITE 270

City ST PAUL State MN Zip Code 55128

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00117

Amount of Each Disbursement this Period

1556.91

Full Name (Last, First, Middle Initial)

**C. STEVEN FOLLIS**

Mailing Address 255 W. MLK BLVD  
#1811

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
MANAGEMENT CONSULTING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
03 / 26 / 2014

Transaction ID : 2014M04L21A00118

Amount of Each Disbursement this Period

820.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

61791.26

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LORI FRANSSSEN**

Mailing Address 10045 WHITETAIL LANE

City TRUCKEE State CA Zip Code 96161

Purpose of Disbursement  
POLITICAL STRATEGY SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2014

Transaction ID : 2014M04L21A00119

Amount of Each Disbursement this Period

8479.47
---------

Full Name (Last, First, Middle Initial)

**B. FRENCH & CO**

Mailing Address 93 STATE STREET  
PO BOX 510

City NEWBURYPORT State MA Zip Code 01950

Purpose of Disbursement  
IT SUPPORT/MAINTENANCE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2014

Transaction ID : 2014M04L21A00127

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. FULL HOUSE EVENTS LLC**

Mailing Address PO BOX 409

City OLDWICK State NJ Zip Code 08858

Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2014

Transaction ID : 2014M04L21A00128

Amount of Each Disbursement this Period

15000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

24979.47
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOHN GIBSON**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

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
0	3		1	9		2	0	1	4

**Transaction ID : 2014M04L21A00129**

Amount of Each Disbursement this Period

1	8	9	7	.	2	8
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. JOHN GIBSON**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

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
0	3		2	6		2	0	1	4

**Transaction ID : 2014M04L21A00140**

Amount of Each Disbursement this Period

1	2	5	2	.	9	3
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Full Name (Last, First, Middle Initial)

**C. GOP DATA TRUST LLC**

Mailing Address PO BOX 12365

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement  
DATA PROCESSING SERVICES

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
0	3		2	7		2	0	1	4

**Transaction ID : 2014M04L21A00148**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2	8	1	5	.	0	2	1
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. GRIGSBY APPLGATE LLC**

Mailing Address 2716 CALDER COURT

City State Zip Code  
FORT WORTH TX 76107

Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00149

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

**B. GRIGSBY APPLGATE LLC**

Mailing Address 2716 CALDER COURT

City State Zip Code  
FORT WORTH TX 76107

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00150

Amount of Each Disbursement this Period

1462.60

Full Name (Last, First, Middle Initial)

**C. THOMAS HALL**

Mailing Address 201 MIDDLETON STREET  
#202

City State Zip Code  
NASHVILLE TN 37210

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2014

Transaction ID : 2014M04L21A00151

Amount of Each Disbursement this Period

9000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

17962.60

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. THOMAS HALL**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Mailing Address 201 MIDDLETON STREET  
#202

**Transaction ID : 2014M04L21A00152**

City NASHVILLE State TN Zip Code 37210

Amount of Each Disbursement this Period

1053.70
---------

Purpose of Disbursement  
TRAVEL EXPENSES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. KRISTAL Q HARTSFIELD**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Mailing Address 310 First Street SE

**Transaction ID : 2014M04L21A00153**

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

295.31
--------

Purpose of Disbursement  
OFFICE SUPPLIES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. DOLLAR TREE STORES, INC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Mailing Address 9620 FORT MEAD RD

**Transaction ID : 2014M04L21A00153M**

City LAUREL State MD Zip Code 20707

Amount of Each Disbursement this Period

295.31
--------

Purpose of Disbursement  
OFFICE SUPPLIES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1349.01
---------

**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KRISTAL Q HARTSFIELD**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

**Transaction ID : 2014M04L21A00154**

Amount of Each Disbursement this Period

57.57

Full Name (Last, First, Middle Initial)

**B. MICHAEL'S ALEXANDRIA VA**

Mailing Address 7690A RICHMOND HWY

City ALEXANDRIA State VA Zip Code 22036

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

**Transaction ID : 2014M04L21A00154M**

Amount of Each Disbursement this Period

57.57

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. KRISTAL Q HARTSFIELD**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

**Transaction ID : 2014M04L21A00155**

Amount of Each Disbursement this Period

31.19

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

88.76

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STAPLES ALEXANDRIA VA**

Mailing Address 3301 JEFFERSON DAVIS HWY

City ALEXANDRIA State VA Zip Code 22314

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

/  /

Transaction ID : 2014M04L21A00155M

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. KRISTAL Q HARTSFIELD**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

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

/  /

Transaction ID : 2014M04L21A00156

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. WALMART ALEXANDRIA VA**

Mailing Address 7910 RICHMOND HIGHWAY

City ALEXANDRIA State VA Zip Code 22306

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

/  /

Transaction ID : 2014M04L21A00156M

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KRISTAL Q HARTSFIELD**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00157

Amount of Each Disbursement this Period

54.01

Full Name (Last, First, Middle Initial)

**B. KRISTAL Q HARTSFIELD**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00158

Amount of Each Disbursement this Period

60.85

Full Name (Last, First, Middle Initial)

**C. KRISTAL Q HARTSFIELD**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00159

Amount of Each Disbursement this Period

107.77

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

222.63

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KRISTAL Q HARTSFIELD**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00160

Amount of Each Disbursement this Period

178.20

Full Name (Last, First, Middle Initial)

**B. KRISTAL Q HARTSFIELD**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00161

Amount of Each Disbursement this Period

183.35

Full Name (Last, First, Middle Initial)

**C. KRISTAL Q HARTSFIELD**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00162

Amount of Each Disbursement this Period

124.06

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

485.61

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. OCEANAIRE**

Mailing Address 1201 F ST NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement  
TRAVEL EXPENSES

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
0	3		1	9		2	0	1	4

Transaction ID : 2014M04L21A00162M

Amount of Each Disbursement this Period

1	2	4	.	0	6
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. THE HAY-ADAMS HOTEL**

Mailing Address 800 16TH ST NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement  
CATERING/FOOD AND BEVERAGE

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
0	3		1	2		2	0	1	4

Transaction ID : 2014M04L21A00163

Amount of Each Disbursement this Period

1	3	8	.	5	3
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. THE HAY-ADAMS HOTEL**

Mailing Address 800 16TH ST NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement  
CATERING/FOOD AND BEVERAGE

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
0	3		1	4		2	0	1	4

Transaction ID : 2014M04L21A00164

Amount of Each Disbursement this Period

2	6	7	.	4	8
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4	0	5	.	9	8
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JILL HOMAN**

Mailing Address 4919 7TH STREET NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : 2014M04L21A00165

Amount of Each Disbursement this Period

248.00

Full Name (Last, First, Middle Initial)

**B. HOON DESIGNS LLC**

Mailing Address 2800 SHIRLINGTON RD  
SUITE 920

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

Transaction ID : 2014M04L21A00166

Amount of Each Disbursement this Period

-6210.00

Full Name (Last, First, Middle Initial)

**C. HOON DESIGNS LLC**

Mailing Address 2800 SHIRLINGTON RD  
SUITE 920

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

Transaction ID : 2014M04L21A00167

Amount of Each Disbursement this Period

-8870.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

-14832.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HOON DESIGNS LLC**

Mailing Address 2800 SHIRLINGTON RD  
SUITE 920

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement  
PRINTING/GRAPHIC SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00168

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. HOON DESIGNS LLC**

Mailing Address 2800 SHIRLINGTON RD  
SUITE 920

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement  
PRINTING/GRAPHIC SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00169

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. HULU LLC**

Mailing Address 12312 W. OLYMPIC BLVD

City LOS ANGELES State CA Zip Code 90064

Purpose of Disbursement  
MEDIA SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00170

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ICS CORPORATION**

Mailing Address 2225 RICHMOND STREET

City PHILADELPHIA State PA Zip Code 19125

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21A00171

Amount of Each Disbursement this Period

19723.96

Full Name (Last, First, Middle Initial)

**B. IMPACT OFFICE PRODUCTS**

Mailing Address P O BOX 403846

City ATLANTA State GA Zip Code 30384

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 M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00172

Amount of Each Disbursement this Period

9758.50

Full Name (Last, First, Middle Initial)

**C. INFO GROUP**

Mailing Address PO BOX 3243

City OMAHA State NE Zip Code 68103

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00173

Amount of Each Disbursement this Period

7753.10

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

37235.56

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. INFO GROUP**

Mailing Address PO BOX 3243

City OMAHA State NE Zip Code 68103

Purpose of Disbursement LIST RENTAL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : 2014M04L21A00174

Amount of Each Disbursement this Period

18770.93

Full Name (Last, First, Middle Initial)

**B. IQ MEDIA GROUP**

Mailing Address 625 WEST RIDGE PIKE BUILDING C, SUITE 100

City CONSHOCKEN State PA Zip Code 19428

Purpose of Disbursement SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00175

Amount of Each Disbursement this Period

3410.00

Full Name (Last, First, Middle Initial)

**C. JACK BOLES PARKING**

Mailing Address PO BOX 190326

City DALLAS State TX Zip Code 75219

Purpose of Disbursement TRANSPORTATION SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00176

Amount of Each Disbursement this Period

389.70

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

22570.63

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOHNSON CONTROLS INC.**

Mailing Address P O BOX 905240

City CHARLOTTE State NC Zip Code 28290-5240

Purpose of Disbursement  
BUILDING MAINTENANCE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00177

Amount of Each Disbursement this Period

7405.94

Full Name (Last, First, Middle Initial)

**B. CJ JORDAN**

Mailing Address TJMG  
312 WOOD WAY DRIVE

City LYNCHBURG State VA Zip Code 24501

Purpose of Disbursement  
POLITICAL STRATEGY SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00178

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. KIMBIA INC.**

Mailing Address 1050 E. 11TH STREET  
SUITE 200

City AUSTIN State TX Zip Code 78702

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00179

Amount of Each Disbursement this Period

6388.44

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

16794.38

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KIRSTIN HOPKINS INC**

Mailing Address 6059 KENWOOD AVENUE

City DALLAS State TX Zip Code 75205

Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00180

Amount of Each Disbursement this Period

33616.00

Full Name (Last, First, Middle Initial)

**B. KIRSTIN HOPKINS INC**

Mailing Address 6059 KENWOOD AVENUE

City DALLAS State TX Zip Code 75205

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00181

Amount of Each Disbursement this Period

1332.00

Full Name (Last, First, Middle Initial)

**C. KLF & COMPANY**

Mailing Address 4015 OLD OAK DRIVE

City LITTLE ROCK State AR Zip Code 72212

Purpose of Disbursement  
POLITICAL STRATEGY SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00182

Amount of Each Disbursement this Period

3000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

37948.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. KLF & COMPANY

Mailing Address 4015 OLD OAK DRIVE

City LITTLE ROCK State AR Zip Code 72212

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00183

Amount of Each Disbursement this Period

976.21

### B. JENNIFER KORN

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

Transaction ID : 2014M04L21A00184

Amount of Each Disbursement this Period

-354.26

### C. JENNIFER KORN

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

Transaction ID : 2014M04L21A00185

Amount of Each Disbursement this Period

-134.54

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

487.41

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. JENNIFER KORN

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

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
0	3		2	7		2	0	1	4

Transaction ID : 2014M04L21A00186

Amount of Each Disbursement this Period

-	8	1	.	7	3
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

### B. JENNIFER KORN

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

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
0	3		2	7		2	0	1	4

Transaction ID : 2014M04L21A00187

Amount of Each Disbursement this Period

-	6	2	.	8	2
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

### C. JENNIFER KORN

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

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
0	3		2	7		2	0	1	4

Transaction ID : 2014M04L21A00188

Amount of Each Disbursement this Period

-	3	0	.	1	4
---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

-	1	7	.	4	6	9
---	---	---	---	---	---	---

**TOTAL** This Period (last page this line number only)..... ▶

-	1	7	.	4	6	9
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. JENNIFER KORN**

Date of Disbursement: MM / DD / YYYY  
03 / 27 / 2014

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID : 2014M04L21A00189

Amount of Each Disbursement this Period: -17.25

Full Name (Last, First, Middle Initial)  
**B. JENNIFER KORN**

Date of Disbursement: MM / DD / YYYY  
03 / 27 / 2014

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID : 2014M04L21A00190

Amount of Each Disbursement this Period: 354.26

Full Name (Last, First, Middle Initial)  
**C. MANDARIN ORIENTAL MIAMI**

Date of Disbursement: MM / DD / YYYY  
03 / 27 / 2014

Mailing Address ATTN: ACCOUNTS RECEIVABLE  
500 BRICKELL KEY DRIVE

City MIAMI State FL Zip Code 33131

Purpose of Disbursement TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID : 2014M04L21A00190M

Amount of Each Disbursement this Period: 354.26

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 337.01

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JENNIFER KORN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

**Transaction ID : 2014M04L21A00191**

Amount of Each Disbursement this Period

17.25

Full Name (Last, First, Middle Initial)

**B. JENNIFER KORN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

**Transaction ID : 2014M04L21A00192**

Amount of Each Disbursement this Period

30.14

Full Name (Last, First, Middle Initial)

**C. JENNIFER KORN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

**Transaction ID : 2014M04L21A00193**

Amount of Each Disbursement this Period

62.82

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

110.21

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JENNIFER KORN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

Transaction ID : 2014M04L21A00194

Amount of Each Disbursement this Period

81.73

Full Name (Last, First, Middle Initial)

**B. JENNIFER KORN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

Transaction ID : 2014M04L21A00195

Amount of Each Disbursement this Period

134.54

Full Name (Last, First, Middle Initial)

**C. LEXIS NEXIS**

Mailing Address PO BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement  
RESEARCH SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00196

Amount of Each Disbursement this Period

957.28

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1173.55

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LEXIS NEXIS**

Mailing Address PO BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement  
RESEARCH SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00197

Amount of Each Disbursement this Period

24515.78

Full Name (Last, First, Middle Initial)

**B. LIQUID CONSULTING, LLC**

Mailing Address 1241 ADAMS STREET #1115

City ST. HELENA State CA Zip Code 94574

Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 05 / 2014

Transaction ID : 2014M04L21A00198

Amount of Each Disbursement this Period

5640.00

Full Name (Last, First, Middle Initial)

**C. LISA WAGNER AND COMPANY**

Mailing Address 102 NORTH CROSS STREET

City WHEATON State IL Zip Code 60189

Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00199

Amount of Each Disbursement this Period

10000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

40155.78

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LOCHLIN PARTNERS**

Mailing Address 8300 GREENSBORO DR  
SUITE 800

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement  
MANAGEMENT CONSULTING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : 2014M04L21A00200

Amount of Each Disbursement this Period

23723.15

Full Name (Last, First, Middle Initial)

**B. LOVAS CO LLC**

Mailing Address 7197 W. MARIPOSA GRANDE LANE

City PEORIA State AZ Zip Code 85383

Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00202

Amount of Each Disbursement this Period

2268.00

Full Name (Last, First, Middle Initial)

**C. LSQ FUNDING GROUP**

Mailing Address PO BOX 404322

City ATLANTA State GA Zip Code 30384

Purpose of Disbursement  
EQUIPMENT MAINTENANCE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00203

Amount of Each Disbursement this Period

2388.88

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

28380.03

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JEANNE LUCKEY**

Mailing Address 2111 BIENVILLE BLVD

City OCEAN SPRINGS State MS Zip Code 39564

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

**Transaction ID : 2014M04L21A00204**

Amount of Each Disbursement this Period

944.00
--------

Full Name (Last, First, Middle Initial)

**B. DELTA AIRLINES**

Mailing Address 1629 K ST NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

**Transaction ID : 2014M04L21A00204M**

Amount of Each Disbursement this Period

944.00
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. MADDEN-MCFARLAND INTERIORS**

Mailing Address 1903 W. 135TH STREET

City LEAWOOD State KS Zip Code 66224

Purpose of Disbursement  
BUILDING MAINTENANCE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		05		2014

**Transaction ID : 2014M04L21A00205**

Amount of Each Disbursement this Period

1456.27
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2400.27
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MAIL AMERICA COMMUNICATIONS,**

Mailing Address INC.  
1174 ELKTON FARM RD, PO BOX 870

City State Zip Code  
FOREST VA 24551

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00206**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. MAIL AMERICA COMMUNICATIONS,**

Mailing Address INC.  
1174 ELKTON FARM RD, PO BOX 870

City State Zip Code  
FOREST VA 24551

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00207**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. MAIL AMERICA COMMUNICATIONS,**

Mailing Address INC.  
1174 ELKTON FARM RD, PO BOX 870

City State Zip Code  
FOREST VA 24551

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00208**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MAIL AMERICA COMMUNICATIONS,**

Mailing Address INC.  
1174 ELKTON FARM RD, PO BOX 870

City State Zip Code  
FOREST VA 24551

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014

**Transaction ID : 2014M04L21A00209**

Amount of Each Disbursement this Period

65067.69

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. MAIL AMERICA COMMUNICATIONS,**

Mailing Address INC.  
1174 ELKTON FARM RD, PO BOX 870

City State Zip Code  
FOREST VA 24551

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

**Transaction ID : 2014M04L21A00210**

Amount of Each Disbursement this Period

204489.78

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. MAIL AMERICA COMMUNICATIONS,**

Mailing Address INC.  
1174 ELKTON FARM RD, PO BOX 870

City State Zip Code  
FOREST VA 24551

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 26 / 2014

**Transaction ID : 2014M04L21A00211**

Amount of Each Disbursement this Period

17678.77

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

287236.24

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MAIL AMERICA COMMUNICATIONS,**

Mailing Address INC.  
1174 ELKTON FARM RD, PO BOX 870

City FOREST State VA Zip Code 24551

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			31			2014			

Transaction ID : 2014M04L21A00212

Amount of Each Disbursement this Period

14701.71
----------

Full Name (Last, First, Middle Initial)

**B. MAJORITY STRATEGIES INC**

Mailing Address 135 PROFESSIONAL DRIVE  
SUITE 104

City PONTE VEDRA BEACH State FL Zip Code 32082

Purpose of Disbursement  
PRINTING/GRAPHIC SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			19			2014			

Transaction ID : 2014M04L21A00213

Amount of Each Disbursement this Period

3925.00
---------

Full Name (Last, First, Middle Initial)

**C. MAXIMUM COMPLIANCE LLC**

Mailing Address 4703 WOODWAY LANE, NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement  
MANAGEMENT CONSULTING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			12			2014			

Transaction ID : 2014M04L21A00214

Amount of Each Disbursement this Period

2000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

20626.71
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MCGLADREY LLP**

Mailing Address 5155 PAYSHERE CIRCLE

City CHICAGO State IL Zip Code 60674

Purpose of Disbursement  
ACCOUNTING AND AUDIT SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00215

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**B. THE MCINTOSH COMPANY INC**

Mailing Address 5310 HARVEST HILL ROAD  
SUITE 209

City DALLAS State TX Zip Code 75230

Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00216

Amount of Each Disbursement this Period

43154.00

Full Name (Last, First, Middle Initial)

**C. THE MCINTOSH COMPANY INC**

Mailing Address 5310 HARVEST HILL ROAD  
SUITE 209

City DALLAS State TX Zip Code 75230

Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00217

Amount of Each Disbursement this Period

60020.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

118174.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CHRIS MCNULTY**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	4

Transaction ID : 2014M04L21A00218

Amount of Each Disbursement this Period

9	.	9	5
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Full Name (Last, First, Middle Initial)

**B. CHRIS MCNULTY**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	4

Transaction ID : 2014M04L21A00219

Amount of Each Disbursement this Period

4	6	.	0	9
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. CHRIS MCNULTY**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	4

Transaction ID : 2014M04L21A00220

Amount of Each Disbursement this Period

7	7	.	9	9
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1	3	4	.	0	3
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1	3	4	.	0	3
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CHRIS MCNULTY**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Transaction ID : 2014M04L21A00221

Amount of Each Disbursement this Period

133.00
--------

Full Name (Last, First, Middle Initial)

**B. CHRIS MCNULTY**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Transaction ID : 2014M04L21A00222

Amount of Each Disbursement this Period

276.39
--------

Full Name (Last, First, Middle Initial)

**C. MARRIOTT BEACHPLACE TOWERS**

Mailing Address 21 S. FT LAUDERDALE BCH BLVD

City FORT LAUDERDALE State FL Zip Code 33316

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Transaction ID : 2014M04L21A00222M

Amount of Each Disbursement this Period

276.39
--------

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

409.39
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CHRIS MCNULTY**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

**Transaction ID : 2014M04L21A00223**

Amount of Each Disbursement this Period

308.44

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. TOP OF THE HILL**

Mailing Address 319 PENN AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

**Transaction ID : 2014M04L21A00223M**

Amount of Each Disbursement this Period

308.44

Category/  
Type

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. MDS COMMUNICATIONS CORPORATION**

Mailing Address 545 W JUANITA AVE

City MESA State AZ Zip Code 85210

Purpose of Disbursement  
TELEMARKETING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

**Transaction ID : 2014M04L21A00224**

Amount of Each Disbursement this Period

2243.50

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2551.94

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MDS COMMUNICATIONS CORPORATION**

Mailing Address 545 W JUANITA AVE

City MESA State AZ Zip Code 85210

Purpose of Disbursement  
TELEMARKETING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00225

Amount of Each Disbursement this Period

3618.50

Full Name (Last, First, Middle Initial)

**B. MDS COMMUNICATIONS CORPORATION**

Mailing Address 545 W JUANITA AVE

City MESA State AZ Zip Code 85210

Purpose of Disbursement  
TELEMARKETING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 26 / 2014

Transaction ID : 2014M04L21A00226

Amount of Each Disbursement this Period

1515.00

Full Name (Last, First, Middle Initial)

**C. MERKLE INC./COGNITIVE DATA**

Mailing Address 100 JAMISON COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement  
MAIL PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00227

Amount of Each Disbursement this Period

54584.26

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

59717.76

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICRO AGE**

Mailing Address PO BOX 2941

City PHOENIX State AZ Zip Code 85062

Purpose of Disbursement  
COMPUTER EQUIPMENT

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
0	3		1	9		2	0	1	4

**Transaction ID : 2014M04L21A00228**

Amount of Each Disbursement this Period

7	0	6	.	1	8
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. MIDTOWN OFFICE CONDOS**

Mailing Address 500 WEST 27TH AVE  
SUITE A

City ANCHORAGE State AK Zip Code 99503

Purpose of Disbursement  
RENT

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
0	3		0	5		2	0	1	4

**Transaction ID : 2014M04L21A00229**

Amount of Each Disbursement this Period

7	9	5	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. MKM STRATEGIES INC**

Mailing Address 3006 WOODSONG LANE

City CLEARWATER State FL Zip Code 33761

Purpose of Disbursement  
TRAVEL EXPENSES

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
0	3		1	9		2	0	1	4

**Transaction ID : 2014M04L21A00230**

Amount of Each Disbursement this Period

1	5	6	.	9	8
---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3	0	7	.	1	0
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**TOTAL** This Period (last page this line number only)..... ▶

3	0	7	.	1	0
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. NATIONAL CAPITAL TELESERVICES,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		05		2014

Mailing Address LLC  
300 FIFTH STREET, NE

**Transaction ID : 2014M04L21A00231**

City WASHINGTON State DC Zip Code 20002

Amount of Each Disbursement this Period

20507.50
----------

Purpose of Disbursement  
TELEMARKETING

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. NATIONAL CAPITAL TELESERVICES,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2014

Mailing Address LLC  
300 FIFTH STREET, NE

**Transaction ID : 2014M04L21A00232**

City WASHINGTON State DC Zip Code 20002

Amount of Each Disbursement this Period

15756.00
----------

Purpose of Disbursement  
TELEMARKETING

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. NATIONAL CAPITAL TELESERVICES,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Mailing Address LLC  
300 FIFTH STREET, NE

**Transaction ID : 2014M04L21A00233**

City WASHINGTON State DC Zip Code 20002

Amount of Each Disbursement this Period

30704.50
----------

Purpose of Disbursement  
TELEMARKETING

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

66968.00
----------

**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. NATIONAL CAPITAL TELESERVICES,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	26	/	2014

Mailing Address LLC  
300 FIFTH STREET, NE

**Transaction ID : 2014M04L21A00234**

City WASHINGTON State DC Zip Code 20002

Amount of Each Disbursement this Period

26451.50
----------

Purpose of Disbursement  
TELEMARKETING

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. NETWORK SOLUTIONS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	12	/	2014

Mailing Address 13861 SUNRISE VALLEY DRIVE

**Transaction ID : 2014M04L21A00235**

City HERNDON State VA Zip Code 20171

Amount of Each Disbursement this Period

85.96
-------

Purpose of Disbursement  
DATA PROCESSING SERVICES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. REED NEUENDORF**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2014

Mailing Address 310 First Street SE

**Transaction ID : 2014M04L21A00236**

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

-200.00
---------

Purpose of Disbursement  
VOID CHECK - REISSUED

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

26337.46
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. REED NEUENDORF**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
STIPEND

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
0	3		2	7		2	0	1	4

**Transaction ID : 2014M04L21A00237**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. NEW FLIGHT CHARTERS**

Mailing Address 525 PONDEROSA DRIVE, #A-4

City JACKSON State WY Zip Code 83001

Purpose of Disbursement  
TRANSPORTATION SERVICES

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
0	3		2	6		2	0	1	4

**Transaction ID : 2014M04L21A00238**

Amount of Each Disbursement this Period

1	7	4	6	9	0	0	1	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. MICHAEL H NOLLER**

Mailing Address 9401 BALL ROAD

City IJAMSVILLE State MD Zip Code 21754

Purpose of Disbursement  
VOID CHECK - REISSUED

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
0	3		2	0		2	0	1	4

**Transaction ID : 2014M04L21A00239**

Amount of Each Disbursement this Period

-	7	5	0	0	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1	6	9	1	9	0	1	0	0	0
---	---	---	---	---	---	---	---	---	---

**TOTAL** This Period (last page this line number only)..... ▶

1	6	9	1	9	0	1	0	0	0
---	---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL H NOLLER**

Mailing Address 9401 BALL ROAD

City IJAMSVILLE State MD Zip Code 21754

Purpose of Disbursement  
PRINTING/GRAPHIC SERVICES

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
03		20		2014

**Transaction ID : 2014M04L21A00240**

Amount of Each Disbursement this Period

750.00
--------

Full Name (Last, First, Middle Initial)

**B. 1-800-GOT-JUNK**

Mailing Address 6315 SEABROOK RD  
SUITE 105

City LAHNAM State MD Zip Code 20706

Purpose of Disbursement  
BUILDING MAINTENANCE

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
03		19		2014

**Transaction ID : 2014M04L21A00241**

Amount of Each Disbursement this Period

4351.00
---------

Full Name (Last, First, Middle Initial)

**C. BENJAMIN OTTENHOFF**

Mailing Address 70 I STREET SE  
#734

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
MANAGEMENT CONSULTING SERVICES

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
03		12		2014

**Transaction ID : 2014M04L21A00242**

Amount of Each Disbursement this Period

15000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

20101.00
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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. OXFORD COMMUNICATION LLC**

Mailing Address PO BOX 1214

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement  
TELEMARKETING

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
0	3		2	6		2	0	1	4

Transaction ID : 2014M04L21A00243

Amount of Each Disbursement this Period

1	0	5	4	5	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. PC GROUP**

Mailing Address P O BOX 398

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement  
IT SUPPORT/MAINTENANCE

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
0	3		0	5		2	0	1	4

Transaction ID : 2014M04L21A00244

Amount of Each Disbursement this Period

4	2	1	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. PCUC ACQUISITION LLC**

Mailing Address PO BOX 678472

City DALLAS State TX Zip Code 75267

Purpose of Disbursement  
DATA PROCESSING SERVICES

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
0	3		1	9		2	0	1	4

Transaction ID : 2014M04L21A00245

Amount of Each Disbursement this Period

1	1	2	5	0	0
---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1	2	7	2	5	0
---	---	---	---	---	---

**TOTAL** This Period (last page this line number only)..... ▶

1	2	7	2	5	0
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PEPCO**

Mailing Address P O BOX 13608

City PHILADELPHIA State PA Zip Code 19101-3608

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00246

Amount of Each Disbursement this Period

16835.53

Full Name (Last, First, Middle Initial)

**B. PEPCO**

Mailing Address PO BOX 13608

City PHILADELPHIA State PA Zip Code 19101-3608

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : 2014M04L21A00247

Amount of Each Disbursement this Period

188.51

Full Name (Last, First, Middle Initial)

**C. PINNACLE LIST COMPANY**

Mailing Address 2800 SHIRLINGTON RD  
SUITE 970

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

Transaction ID : 2014M04L21A00248

Amount of Each Disbursement this Period

-3627.74

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

13396.30

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PINNACLE LIST COMPANY**

Mailing Address 2800 SHIRLINGTON RD  
SUITE 970

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00249

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. PIRYX INC**

Mailing Address 144 2ND ST  
1ST FL

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
REVENUE PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00250

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. PIRYX INC**

Mailing Address 144 2ND ST  
1ST FL

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement  
REVENUE PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00251

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PLUVIOUS GROUP**

Mailing Address 515 S. FIGUEROA STREET  
16TH FLOOR

City LOA ANGELES State CA Zip Code 90071

Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00252

Amount of Each Disbursement this Period

14568.00

Full Name (Last, First, Middle Initial)

**B. PLUVIOUS GROUP**

Mailing Address 515 S. FIGUEROA STREET  
16TH FLOOR

City LOA ANGELES State CA Zip Code 90071

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00253

Amount of Each Disbursement this Period

92.79

Full Name (Last, First, Middle Initial)

**C. PLUVIOUS GROUP**

Mailing Address 515 S. FIGUEROA STREET  
16TH FLOOR

City LOA ANGELES State CA Zip Code 90071

Purpose of Disbursement  
FUNDRAISING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : 2014M04L21A00254

Amount of Each Disbursement this Period

15856.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

30516.79

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PREFERRED COMMUNICATIONS**

Mailing Address 815 KING STREET  
SUITE 209

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 05 / 2014

Transaction ID : 2014M04L21A00255

Amount of Each Disbursement this Period

18916.33

Full Name (Last, First, Middle Initial)

**B. PREFERRED COMMUNICATIONS**

Mailing Address 815 KING STREET  
SUITE 209

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00256

Amount of Each Disbursement this Period

7933.80

Full Name (Last, First, Middle Initial)

**C. PREFERRED COMMUNICATIONS**

Mailing Address 815 KING STREET  
SUITE 209

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 26 / 2014

Transaction ID : 2014M04L21A00257

Amount of Each Disbursement this Period

11409.10

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

38259.23

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PRICE MODERN LLC**

Mailing Address 4400 FORBES BLVD, SUITE A

City LANHAM State MD Zip Code 20706

Purpose of Disbursement  
OFFICE EQUIPMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00258

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. PRINT MAIL COMMUNICATIONS INC**

Mailing Address 4333 DAVENPORT RD

City FREDERICKSBURG State VA Zip Code 22408

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00259

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. PRINT MAIL COMMUNICATIONS INC**

Mailing Address 4333 DAVENPORT RD

City FREDERICKSBURG State VA Zip Code 22408

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00260

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PURCHASE POWER**

Mailing Address **PITNEY BOWES POSTAGE BY PHONE  
P O BOX 371874**

City **PITTSBURGH** State **PA** Zip Code **15250**

Purpose of Disbursement  
**POSTAGE**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00261**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. REV.COM**

Mailing Address **461 BUSH STREET  
FL 4**

City **SAN FRANCISCO** State **CA** Zip Code **94108**

Purpose of Disbursement  
**MEDIA SERVICES**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00262**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. LINDSAY REYNOLDS**

Mailing Address **2106 CONVENT LANE**

City **CINCINNATI** State **OH** Zip Code **45208**

Purpose of Disbursement  
**FUNDRAISING SERVICES**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00263**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LINDSAY REYNOLDS**

Mailing Address 2106 CONVENT LANE

City CINCINNATI State OH Zip Code 45208

Purpose of Disbursement  
TRAVEL EXPENSES

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
0	3		0	5		2	0	1	4

Transaction ID : 2014M04L21A00264

Amount of Each Disbursement this Period

2	7	1	8	.	1	9
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. MARYLAND CHILD SUPPORT ACCT**

Mailing Address P O BOX 1796

City BALTIMORE State MD Zip Code 21297

Purpose of Disbursement  
GARNISHMENT

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
0	3		1	4		2	0	1	4

Transaction ID : 2014M04L21A00265

Amount of Each Disbursement this Period

5	2	9	.	1	9
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. COLORADO DEPARTMENT OF REVENUE**

Mailing Address 1375 SHERMAN STREET

City DENVER State CO Zip Code 80261-0013

Purpose of Disbursement  
TAXES

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
0	3		1	4		2	0	1	4

Transaction ID : 2014M04L21A00266

Amount of Each Disbursement this Period

2	2	4	.	0	0
---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3	4	7	.	1	3	8
---	---	---	---	---	---	---

**TOTAL** This Period (last page this line number only)..... ▶

3	4	7	.	1	3	8
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. D.C. TREASURER**

Mailing Address OFFICE OF TAX AND REVENUE  
P O BOX 96019

City WASHINGTON State DC Zip Code 20090-6019

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21A00267

Amount of Each Disbursement this Period

16407.44

Full Name (Last, First, Middle Initial)

**B. GEORGIA DEPARTMENT OF REVENUE**

Mailing Address 1800 CENTURY BLVD NE

City ATLANTA State GA Zip Code 30345

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21A00268

Amount of Each Disbursement this Period

125.92

Full Name (Last, First, Middle Initial)

**C. ILLINOIS DEPARTMENT OF REVENUE**

Mailing Address PO BOX 19006

City SPRINGFIELD State IL Zip Code 62794

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21A00269

Amount of Each Disbursement this Period

258.07

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

16791.43

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. INTERNAL REVENUE SERVICE**

Mailing Address 11601 ROOSEVELT BLVD

City PHILADELPHIA State PA Zip Code 19154

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21A00270

Amount of Each Disbursement this Period

171334.11

Full Name (Last, First, Middle Initial)

**B. IOWA DEPARTMENT OF REVENUE**

Mailing Address PO BOX 10457

City DES MOINES State IA Zip Code 50306

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21A00271

Amount of Each Disbursement this Period

241.11

Full Name (Last, First, Middle Initial)

**C. LOUISIANA DEPT OF REVENUE**

Mailing Address PO BOX 201

City BATON ROUGE State LA Zip Code 70821

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21A00272

Amount of Each Disbursement this Period

85.85

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

171661.07

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MARYLAND STATE COMPTROLLER**

Mailing Address OF THE TREASURY  
110 CARROLL ST

City ANNAPOLIS State MD Zip Code 21411

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21A00273

Amount of Each Disbursement this Period

3452.39

Full Name (Last, First, Middle Initial)

**B. MICHIGAN DEPARTMENT**

Mailing Address OF TREASURY  
PO BOX 30778

City LANSING State MI Zip Code 48909

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21A00274

Amount of Each Disbursement this Period

106.25

Full Name (Last, First, Middle Initial)

**C. NEW MEXICO DEPARTMENT OF**

Mailing Address TAXATION & REVENUE  
1100 SOUTH ST FRANCIS DR

City SANTA FE State NM Zip Code 87504

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21A00275

Amount of Each Disbursement this Period

89.52

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3648.16

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. NORTH CAROLINA DEPARTMENT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2014

Mailing Address OF REVENUE  
PO BOX 25000

**Transaction ID : 2014M04L21A00276**

City RALEIGH State NC Zip Code 27640-0100

Amount of Each Disbursement this Period

385.00
--------

Purpose of Disbursement  
TAXES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. OHIO DEPARTMENT OF TAXATION**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2014

Mailing Address PO BOX 347

**Transaction ID : 2014M04L21A00277**

City COLUMBUS State OH Zip Code 43216

Amount of Each Disbursement this Period

329.09
--------

Purpose of Disbursement  
TAXES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. OKLAHOMA TAX COMMISSION**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2014

Mailing Address 2501 NORTH LINCOLN BLVD

**Transaction ID : 2014M04L21A00278**

City OKLAHOMA CITY State OK Zip Code 73194

Amount of Each Disbursement this Period

340.00
--------

Purpose of Disbursement  
TAXES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1054.09
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SC DEPARTMENT OF REVENUE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Mailing Address WITHHOLDING

**Transaction ID : 2014M04L21A00279**

City COLUMBIA State SC Zip Code 29214-0004

Amount of Each Disbursement this Period

593.66
--------

Purpose of Disbursement TAXES

--

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. STATE OF ARKANSAS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Mailing Address DEPARTMENT OF FINANCE AND ADMINISTRATION; 1509 WEST 7TH ST

**Transaction ID : 2014M04L21A00280**

City LITTLE ROCK State AR Zip Code 72201

Amount of Each Disbursement this Period

491.08
--------

Purpose of Disbursement TAXES

--

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. STATE OF CALIFORNIA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Mailing Address FRANCHISE TAX BOARD PO BOX 942840

**Transaction ID : 2014M04L21A00281**

City SACRAMENTO State CA Zip Code 94240

Amount of Each Disbursement this Period

156.94
--------

Purpose of Disbursement TAXES

--

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1241.68
---------

**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STATE OF WISCONSIN**

Mailing Address DEPT OF REVENUE  
2135 RIMROCK RD; PO BOX 8902

City MADISON State WI Zip Code 53708-8902

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21A00282

Amount of Each Disbursement this Period

993.23

Full Name (Last, First, Middle Initial)

**B. VIRGINIA COMMONWEALTH DEPT**

Mailing Address OF TAXATION  
PO BOX 1115

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21A00283

Amount of Each Disbursement this Period

9975.47

Full Name (Last, First, Middle Initial)

**C. MARYLAND CHILD SUPPORT ACCT**

Mailing Address P O BOX 1796

City BALTIMORE State MD Zip Code 21297

Purpose of Disbursement  
GARNISHMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21A00284

Amount of Each Disbursement this Period

529.19

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

11497.89

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COLORADO DEPARTMENT OF REVENUE**

Mailing Address 1375 SHERMAN STREET

City DENVER State CO Zip Code 80261-0013

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21A00285

Amount of Each Disbursement this Period

224.00

Full Name (Last, First, Middle Initial)

**B. D.C. TREASURER**

Mailing Address OFFICE OF TAX AND REVENUE  
P O BOX 96019

City WASHINGTON State DC Zip Code 20090-6019

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21A00286

Amount of Each Disbursement this Period

13187.80

Full Name (Last, First, Middle Initial)

**C. GEORGIA DEPARTMENT OF REVENUE**

Mailing Address 1800 CENTURY BLVD NE

City ATLANTA State GA Zip Code 30345

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21A00287

Amount of Each Disbursement this Period

139.42

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

13551.22

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ILLINOIS DEPARTMENT OF REVENUE**

Mailing Address PO BOX 19006

City SPRINGFIELD State IL Zip Code 62794

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21A00288

Amount of Each Disbursement this Period

258.07

Full Name (Last, First, Middle Initial)

**B. INTERNAL REVENUE SERVICE**

Mailing Address 11601 ROOSEVELT BLVD

City PHILADELPHIA State PA Zip Code 19154

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21A00289

Amount of Each Disbursement this Period

191750.73

Full Name (Last, First, Middle Initial)

**C. IOWA DEPARTMENT OF REVENUE**

Mailing Address PO BOX 10457

City DES MOINES State IA Zip Code 50306

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21A00290

Amount of Each Disbursement this Period

241.11

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

192249.91

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LOUISIANA DEPT OF REVENUE**

Mailing Address PO BOX 201

City BATON ROUGE State LA Zip Code 70821

Purpose of Disbursement  
TAXES

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
0	3		3	1		2	0	1	4

Transaction ID : 2014M04L21A00291

Amount of Each Disbursement this Period

8	5	.	8	5
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. MARYLAND STATE COMPTROLLER**

Mailing Address OF THE TREASURY  
110 CARROLL ST

City ANNAPOLIS State MD Zip Code 21411

Purpose of Disbursement  
TAXES

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
0	3		3	1		2	0	1	4

Transaction ID : 2014M04L21A00292

Amount of Each Disbursement this Period

3	4	8	0	.	9	9
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. MICHIGAN DEPARTMENT**

Mailing Address OF TREASURY  
PO BOX 30778

City LANSING State MI Zip Code 48909

Purpose of Disbursement  
TAXES

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
0	3		3	1		2	0	1	4

Transaction ID : 2014M04L21A00293

Amount of Each Disbursement this Period

1	4	4	.	0	5
---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3	7	1	0	.	8	9
---	---	---	---	---	---	---

3	7	1	0	.	8	9
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. NEW MEXICO DEPARTMENT OF**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Mailing Address TAXATION & REVENUE  
1100 SOUTH ST FRANCIS DR

**Transaction ID : 2014M04L21A00294**

City SANTA FE State NM Zip Code 87504

Amount of Each Disbursement this Period

139.35
--------

Purpose of Disbursement  
TAXES

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. NORTH CAROLINA DEPARTMENT**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Mailing Address OF REVENUE  
PO BOX 25000

**Transaction ID : 2014M04L21A00295**

City RALEIGH State NC Zip Code 27640-0100

Amount of Each Disbursement this Period

452.35
--------

Purpose of Disbursement  
TAXES

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. OHIO DEPARTMENT OF TAXATION**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Mailing Address PO BOX 347

**Transaction ID : 2014M04L21A00296**

City COLUMBUS State OH Zip Code 43216

Amount of Each Disbursement this Period

329.09
--------

Purpose of Disbursement  
TAXES

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

920.79
--------

**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. OKLAHOMA TAX COMMISSION**

Mailing Address 2501 NORTH LINCOLN BLVD

City OKLAHOMA CITY State OK Zip Code 73194

Purpose of Disbursement  
TAXES

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
0	3		3	1		2	0	1	4

Transaction ID : 2014M04L21A00297

Amount of Each Disbursement this Period

3	4	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. PENNSYLVANIA DEPARTMENT**

Mailing Address OF REVENUE  
BUREAU OF BUSINESS TRUST FUND TAXE

City HARRISBURG State PA Zip Code 17128

Purpose of Disbursement  
TAXES

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
0	3		3	1		2	0	1	4

Transaction ID : 2014M04L21A00298

Amount of Each Disbursement this Period

3	4	5	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. SC DEPARTMENT OF REVENUE**

Mailing Address WITHHOLDING

City COLUMBIA State SC Zip Code 29214-0004

Purpose of Disbursement  
TAXES

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
0	3		3	1		2	0	1	4

Transaction ID : 2014M04L21A00299

Amount of Each Disbursement this Period

5	9	3	6	6	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1	2	7	8	7	1	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STATE OF ARKANSAS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Mailing Address DEPARTMENT OF FINANCE AND  
ADMINISTRATION; 1509 WEST 7TH ST

**Transaction ID : 2014M04L21A00300**

City Little Rock State AR Zip Code 72201

Amount of Each Disbursement this Period

491.08
--------

Purpose of Disbursement  
TAXES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. STATE OF CALIFORNIA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Mailing Address FRANCHISE TAX BOARD  
PO BOX 942840

**Transaction ID : 2014M04L21A00301**

City SACRAMENTO State CA Zip Code 94240

Amount of Each Disbursement this Period

2011.15
---------

Purpose of Disbursement  
TAXES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. STATE OF WISCONSIN**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Mailing Address DEPT OF REVENUE  
2135 RIMROCK RD; PO BOX 8902

**Transaction ID : 2014M04L21A00302**

City MADISON State WI Zip Code 53708-8902

Amount of Each Disbursement this Period

1097.29
---------

Purpose of Disbursement  
TAXES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3599.52
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. VIRGINIA COMMONWEALTH DEPT**

Mailing Address OF TAXATION  
PO BOX 1115

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21A00303

Amount of Each Disbursement this Period

22799.62

Full Name (Last, First, Middle Initial)

**B. ROOSEVELT GROUP LLC**

Mailing Address PO BOX 1324

City HUDSON State WI Zip Code 54016

Purpose of Disbursement  
MANAGEMENT CONSULTING SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00304

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. ROOSEVELT GROUP LLC**

Mailing Address PO BOX 1324

City HUDSON State WI Zip Code 54016

Purpose of Disbursement  
MANAGEMENT CONSULTING SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : 2014M04L21A00305

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

22799.62

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RST MARKETING ASSOCIATES INC**

Mailing Address 1272 CORPORATE PARK ROAD

City State Zip Code  
FOREST VA 24551

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00306**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. RST MARKETING ASSOCIATES INC**

Mailing Address 1272 CORPORATE PARK ROAD

City State Zip Code  
FOREST VA 24551

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00307**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. RST MARKETING ASSOCIATES INC**

Mailing Address 1272 CORPORATE PARK DRIVE

City State Zip Code  
FOREST VA 24551

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00308**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RST MARKETING ASSOCIATES INC**

Mailing Address 1272 CORPORATE PARK DRIVE

City State Zip Code  
FOREST VA 24551

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	19	/	2014

Transaction ID : 2014M04L21A00309

Amount of Each Disbursement this Period

24786.91
----------

Full Name (Last, First, Middle Initial)

**B. JOHN RYDER**

Mailing Address 310 First Street SE

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	19	/	2014

Transaction ID : 2014M04L21A00310

Amount of Each Disbursement this Period

64.70
-------

Full Name (Last, First, Middle Initial)

**C. JOHN RYDER**

Mailing Address 310 First Street SE

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	19	/	2014

Transaction ID : 2014M04L21A00311

Amount of Each Disbursement this Period

725.50
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

25577.11
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DELTA AIRLINES**

Mailing Address 1629 K ST NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Transaction ID : 2014M04L21A00311M

Amount of Each Disbursement this Period

725.50
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. JOHN RYDER**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Transaction ID : 2014M04L21A00312

Amount of Each Disbursement this Period

456.86
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. THE LIAISON-CAPITOL HILL**

Mailing Address AN AFINIA HOTEL  
415 NEW JERSEY AVE NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Transaction ID : 2014M04L21A00312M

Amount of Each Disbursement this Period

456.86
--------

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

456.86
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOHN RYDER**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : 2014M04L21A00313

Amount of Each Disbursement this Period

62.00
-------

Full Name (Last, First, Middle Initial)

**B. JOHN RYDER**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : 2014M04L21A00314

Amount of Each Disbursement this Period

562.54
--------

Full Name (Last, First, Middle Initial)

**C. MARRIOTT-CAPITOL HILL**

Mailing Address 140 L ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : 2014M04L21A00314M

Amount of Each Disbursement this Period

562.54
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[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

624.54
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOHN RYDER**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	26	/	2014

**Transaction ID : 2014M04L21A00315**

Amount of Each Disbursement this Period

803.50
--------

Category/Type

Full Name (Last, First, Middle Initial)

**B. US AIRWAYS**

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	26	/	2014

**Transaction ID : 2014M04L21A00315M**

Amount of Each Disbursement this Period

803.50
--------

Category/Type

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. SCHINDLER ELEVATOR CORPORATION**

Mailing Address P O BOX 93050

City CHICAGO State IL Zip Code 60673-3050

Purpose of Disbursement  
BUILDING MAINTENANCE

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	05	/	2014

**Transaction ID : 2014M04L21A00316**

Amount of Each Disbursement this Period

4020.48
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Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4823.98
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00317

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00318

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00319

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00320**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00321**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00322**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00323

Amount of Each Disbursement this Period

102.75

Full Name (Last, First, Middle Initial)

**B. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00324

Amount of Each Disbursement this Period

103.35

Full Name (Last, First, Middle Initial)

**C. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00325

Amount of Each Disbursement this Period

182.11

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

388.21

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00326**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00327**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00328**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2014

Transaction ID : 2014M04L21A00329

Amount of Each Disbursement this Period

-103.35

Full Name (Last, First, Middle Initial)

**B. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2014

Transaction ID : 2014M04L21A00330

Amount of Each Disbursement this Period

-102.75

Full Name (Last, First, Middle Initial)

**C. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2014

Transaction ID : 2014M04L21A00331

Amount of Each Disbursement this Period

-96.97

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

-303.07

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

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
03		20		2014

**Transaction ID : 2014M04L21A00332**

Amount of Each Disbursement this Period

-85.73
--------

Full Name (Last, First, Middle Initial)

**B. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

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
03		20		2014

**Transaction ID : 2014M04L21A00333**

Amount of Each Disbursement this Period

-72.24
--------

Full Name (Last, First, Middle Initial)

**C. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

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
03		20		2014

**Transaction ID : 2014M04L21A00334**

Amount of Each Disbursement this Period

-53.11
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

-211.08
---------

**TOTAL** This Period (last page this line number only)..... ▶

--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

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
03		20		2014

Transaction ID : 2014M04L21A00335

Amount of Each Disbursement this Period

-51.98
--------

Full Name (Last, First, Middle Initial)

**B. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

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
03		20		2014

Transaction ID : 2014M04L21A00336

Amount of Each Disbursement this Period

-13.51
--------

Full Name (Last, First, Middle Initial)

**C. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

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
03		20		2014

Transaction ID : 2014M04L21A00337

Amount of Each Disbursement this Period

13.51
-------

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

-51.98
--------

**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. PATRICK SEBASTIAN</b>		Date of Disbursement MM / DD / YYYY 03 / 20 / 2014
Mailing Address 310 First Street SE		<b>Transaction ID : 2014M04L21A00338</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement TRAVEL EXPENSES	Amount of Each Disbursement this Period 51.98
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PATRICK SEBASTIAN</b>		Date of Disbursement MM / DD / YYYY 03 / 20 / 2014
Mailing Address 310 First Street SE		<b>Transaction ID : 2014M04L21A00339</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement TRAVEL EXPENSES	Amount of Each Disbursement this Period 53.11
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PATRICK SEBASTIAN</b>		Date of Disbursement MM / DD / YYYY 03 / 20 / 2014
Mailing Address 310 First Street SE		<b>Transaction ID : 2014M04L21A00340</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement TRAVEL EXPENSES	Amount of Each Disbursement this Period 72.24
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	177.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 20 / 2014

Transaction ID : 2014M04L21A00341

Amount of Each Disbursement this Period

85.73

Full Name (Last, First, Middle Initial)

**B. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 20 / 2014

Transaction ID : 2014M04L21A00342

Amount of Each Disbursement this Period

96.97

Full Name (Last, First, Middle Initial)

**C. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 20 / 2014

Transaction ID : 2014M04L21A00343

Amount of Each Disbursement this Period

102.75

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

285.45

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2014

**Transaction ID : 2014M04L21A00344**

Amount of Each Disbursement this Period

103.35

Full Name (Last, First, Middle Initial)

**B. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2014

**Transaction ID : 2014M04L21A00345**

Amount of Each Disbursement this Period

182.11

Full Name (Last, First, Middle Initial)

**C. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 20 / 2014

**Transaction ID : 2014M04L21A00346**

Amount of Each Disbursement this Period

235.04

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

520.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 20 / 2014

Transaction ID : 2014M04L21A00347

Amount of Each Disbursement this Period

-85.73

Full Name (Last, First, Middle Initial)

**B. PATRICK SEBASTIAN**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 20 / 2014

Transaction ID : 2014M04L21A00348

Amount of Each Disbursement this Period

-51.98

Full Name (Last, First, Middle Initial)

**C. SECURITAS SECURITY SERVICES**

Mailing Address P.O. BOX 403412

City ATLANTA State GA Zip Code 30384-3412

Purpose of Disbursement  
SECURITY SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 05 / 2014

Transaction ID : 2014M04L21A00349

Amount of Each Disbursement this Period

5662.51

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5524.80

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SECURITAS SECURITY SERVICES**

Mailing Address P.O. BOX 403412

City ATLANTA State GA Zip Code 30384-3412

Purpose of Disbursement  
SECURITY SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00350

Amount of Each Disbursement this Period

5155.42

Full Name (Last, First, Middle Initial)

**B. SECURITAS SECURITY SERVICES**

Mailing Address P.O. BOX 403412

City ATLANTA State GA Zip Code 30384-3412

Purpose of Disbursement  
SECURITY SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00351

Amount of Each Disbursement this Period

5239.93

Full Name (Last, First, Middle Initial)

**C. SECURITAS SECURITY SERVICES**

Mailing Address P.O. BOX 403412

City ATLANTA State GA Zip Code 30384-3412

Purpose of Disbursement  
SECURITY SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : 2014M04L21A00352

Amount of Each Disbursement this Period

5218.80

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

15614.15

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SMARTECH CORPORATION**

Mailing Address AIRNET  
801 BROAD STREET, SUITE 530

City CHATTANOOGA State TN Zip Code 37402

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 05 / 2014

Transaction ID : 2014M04L21A00353

Amount of Each Disbursement this Period

650.09

Full Name (Last, First, Middle Initial)

**B. SMARTECH CORPORATION**

Mailing Address AIRNET  
801 BROAD STREET, SUITE 530

City CHATTANOOGA State TN Zip Code 37402

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 06 / 2014

Transaction ID : 2014M04L21A00354

Amount of Each Disbursement this Period

-650.09

Full Name (Last, First, Middle Initial)

**C. SMARTECH CORPORATION**

Mailing Address AIRNET  
801 BROAD STREET, SUITE 530

City CHATTANOOGA State TN Zip Code 37402

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 06 / 2014

Transaction ID : 2014M04L21A00355

Amount of Each Disbursement this Period

650.09

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

650.09

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SMARTECH CORPORATION**

Mailing Address AIRNET  
801 BROAD STREET, SUITE 530

City CHATTANOOGA State TN Zip Code 37402

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

Transaction ID : 2014M04L21A00356

Amount of Each Disbursement this Period

-464.35

Full Name (Last, First, Middle Initial)

**B. SMARTECH CORPORATION**

Mailing Address AIRNET  
801 BROAD STREET, SUITE 530

City CHATTANOOGA State TN Zip Code 37402

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00357

Amount of Each Disbursement this Period

466.74

Full Name (Last, First, Middle Initial)

**C. SMARTECH CORPORATION**

Mailing Address AIRNET  
801 BROAD STREET, SUITE 530

City CHATTANOOGA State TN Zip Code 37402

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : 2014M04L21A00358

Amount of Each Disbursement this Period

6404.85

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6407.24

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST PUBLISHING AND**

Mailing Address MAILING CORPORATION  
2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

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
03			05			2014			

Transaction ID : 2014M04L21A00359

Amount of Each Disbursement this Period

4333.89
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Full Name (Last, First, Middle Initial)

**B. SOUTHWEST PUBLISHING AND**

Mailing Address MAILING CORPORATION  
2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
VOID CHECK - REISSUED

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
03			05			2014			

Transaction ID : 2014M04L21A00360

Amount of Each Disbursement this Period

-86.67
--------

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST PUBLISHING AND**

Mailing Address MAILING CORPORATION  
2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
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
03			06			2014			

Transaction ID : 2014M04L21A00361

Amount of Each Disbursement this Period

40000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

44247.22
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST PUBLISHING AND**

Mailing Address MAILING CORPORATION  
2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00362

Amount of Each Disbursement this Period

51938.75

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST PUBLISHING AND**

Mailing Address MAILING CORPORATION  
2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00363

Amount of Each Disbursement this Period

630.98

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST PUBLISHING AND**

Mailing Address MAILING CORPORATION  
2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2014

Transaction ID : 2014M04L21A00364

Amount of Each Disbursement this Period

-1038.77

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

51530.96

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST PUBLISHING AND**

Mailing Address MAILING CORPORATION  
2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014

Transaction ID : 2014M04L21A00365

Amount of Each Disbursement this Period

65641.62

**B. SOUTHWEST PUBLISHING AND**

Mailing Address MAILING CORPORATION  
2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00366

Amount of Each Disbursement this Period

2646.40

**C. SOUTHWEST PUBLISHING AND**

Mailing Address MAILING CORPORATION  
2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00367

Amount of Each Disbursement this Period

-52.92

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8235.10

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST PUBLISHING AND**

Mailing Address MAILING CORPORATION  
2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	4		

Transaction ID : 2014M04L21A00368

Amount of Each Disbursement this Period

8	4	1	8	.	1	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST PUBLISHING AND**

Mailing Address MAILING CORPORATION  
2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	4		

Transaction ID : 2014M04L21A00369

Amount of Each Disbursement this Period

-	4	3	.	9	5
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST PUBLISHING AND**

Mailing Address MAILING CORPORATION  
2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	7			2	0	1	4		

Transaction ID : 2014M04L21A00370

Amount of Each Disbursement this Period

3	0	0	0	.	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3	8	3	7	.	1	5
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST PUBLISHING AND**

Mailing Address MAILING CORPORATION  
2600 NW TOPEKA BLVD

City TOPEKA State KS Zip Code 66617

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21A00371

Amount of Each Disbursement this Period

30054.83

Full Name (Last, First, Middle Initial)

**B. SPRINT**

Mailing Address P O BOX 4181

City CAROL STREAM State IL Zip Code 60197-4181

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00372

Amount of Each Disbursement this Period

391.65

Full Name (Last, First, Middle Initial)

**C. SHAWN STEEL**

Mailing Address 27520 HAWTHORNE BLVD STE 270

City PALOS VERDES State CA Zip Code 90274

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00373

Amount of Each Disbursement this Period

1672.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

32118.48

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UNITED AIRLINES**

Mailing Address 2013 NETWORK PLACE

City CHICAGO State IL Zip Code 60673

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00373M

Amount of Each Disbursement this Period

1672.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. STEINERT PRINTING COMPANY INC**

Mailing Address 1465 S. WASHBURN STREET

City OSHKOSH State WI Zip Code 54904

Purpose of Disbursement  
PRINTING/GRAPHIC SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00374

Amount of Each Disbursement this Period

5127.70

Full Name (Last, First, Middle Initial)

**C. STRATEGIC SOLUTIONS INC**

Mailing Address 3724 DUNBARTON DR

City MOUNTAIN BROOK State AL Zip Code 35223

Purpose of Disbursement  
MANAGEMENT CONSULTING SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00375

Amount of Each Disbursement this Period

12000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

17127.70

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRATEGIC SOLUTIONS INC**

Mailing Address 3724 DUNBARTON DR

City MOUNTAIN BROOK State AL Zip Code 35223

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00376

Amount of Each Disbursement this Period

464.00

Full Name (Last, First, Middle Initial)

**B. STRATEGIC FUNDRAISING, INC**

Mailing Address 2625 MOMENTUM PLACE

City CHICAGO State IL Zip Code 60689

Purpose of Disbursement  
TELEMARKETING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00377

Amount of Each Disbursement this Period

128044.15

Full Name (Last, First, Middle Initial)

**C. STRATEGIC FUNDRAISING, INC**

Mailing Address 2625 MOMENTUM PLACE

City CHICAGO State IL Zip Code 60689

Purpose of Disbursement  
TELEMARKETING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00378

Amount of Each Disbursement this Period

140658.11

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

269166.26

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRATEGIC FUNDRAISING, INC**

Mailing Address 2625 MOMENTUM PLACE

City CHICAGO State IL Zip Code 60689

Purpose of Disbursement  
TELEMARKETING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00379

Amount of Each Disbursement this Period

123539.69

Full Name (Last, First, Middle Initial)

**B. STRATEGIC FUNDRAISING, INC**

Mailing Address 2625 MOMENTUM PLACE

City CHICAGO State IL Zip Code 60689

Purpose of Disbursement  
TELEMARKETING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
03 / 26 / 2014

Transaction ID : 2014M04L21A00380

Amount of Each Disbursement this Period

71040.91

Full Name (Last, First, Middle Initial)

**C. STRATEGIC MARKETING & MAILING**

Mailing Address 3002 N. APOLLO DRIVE  
SUITE 6

City CHAMPAIGN State IL Zip Code 61822

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
03 / 26 / 2014

Transaction ID : 2014M04L21A00381

Amount of Each Disbursement this Period

68064.93

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

262645.53

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRATEGIC MARKETING & MAILING**

Mailing Address 3002 N. APOLLO DRIVE  
SUITE 6

City CHAMPAIGN State IL Zip Code 61822

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2014

Transaction ID : 2014M04L21A00382

Amount of Each Disbursement this Period

141412.56

Full Name (Last, First, Middle Initial)

**B. STRATIFIED DATA**

Mailing Address 8113 HICKORY CREEK DR

City AUSTIN State TX Zip Code 78735

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

Transaction ID : 2014M04L21A00383

Amount of Each Disbursement this Period

-13048.91

Full Name (Last, First, Middle Initial)

**C. STRATIFIED DATA**

Mailing Address 8113 HICKORY CREEK DR

City AUSTIN State TX Zip Code 78735

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

Transaction ID : 2014M04L21A00384

Amount of Each Disbursement this Period

13048.91

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

141412.56

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STUART & ASSOCIATES INC**

Mailing Address 15919 INDUSTRIAL PRKY

City State Zip Code  
CLEVELAND OH 44135

Purpose of Disbursement  
POLITICAL SOUVENIERS - APPAREL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00385

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. SUFFOLK COUNTY**

Mailing Address PO BOX 700

City State Zip Code  
YAPHANK NY 11980

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00386

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. SUFFOLK COUNTY**

Mailing Address PO BOX 700

City State Zip Code  
YAPHANK NY 11980

Purpose of Disbursement  
VOTER FILE MAINTENANCE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00387

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SUFFOLK COUNTY**

Mailing Address PO BOX 700

City YAPHANK State NY Zip Code 11980

Purpose of Disbursement  
VOID CHECK - REISSUED

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
03			27			2014			

Transaction ID : 2014M04L21A00388

Amount of Each Disbursement this Period

-258.00
---------

Full Name (Last, First, Middle Initial)

**B. SULLIVAN ALVARADO LLC**

Mailing Address PO BOX 340069

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement  
FUNDRAISING SERVICES

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
03			12			2014			

Transaction ID : 2014M04L21A00389

Amount of Each Disbursement this Period

8358.00
---------

Full Name (Last, First, Middle Initial)

**C. SUPER ROOTER**

Mailing Address 289 MAIN STREET

City LOTHIAN State MD Zip Code 20711

Purpose of Disbursement  
BUILDING 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
03			05			2014			

Transaction ID : 2014M04L21A00390

Amount of Each Disbursement this Period

450.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8550.00
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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TAOS MOUNTAIN INC**

Mailing Address PO BOX 225

City SANTA CLARA State CA Zip Code 95052

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00391

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. TAOS MOUNTAIN INC**

Mailing Address PO BOX 225

City SANTA CLARA State CA Zip Code 95052

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00392

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. TAOS MOUNTAIN INC**

Mailing Address PO BOX 225

City SANTA CLARA State CA Zip Code 95052

Purpose of Disbursement  
DATA PROCESSING SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00393

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TAOS MOUNTAIN INC**

Mailing Address PO BOX 225

City SANTA CLARA State CA Zip Code 95052

Purpose of Disbursement  
DATA PROCESSING SERVICES

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
0	3		2	6		2	0	1	4

Transaction ID : 2014M04L21A00394

Amount of Each Disbursement this Period

4	9	4	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. TARGET ENTERPRISES LLC**

Mailing Address 15260 VENTURA BLVD

City SHERMAN OAKS State CA Zip Code 91403

Purpose of Disbursement  
MEDIA SERVICES

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
0	3		1	4		2	0	1	4

Transaction ID : 2014M04L21A00395

Amount of Each Disbursement this Period

1	0	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. TARGET OUTREACH INC.**

Mailing Address TIMBERS BUILDING  
700 W. VIRGINIA STREET, SUITE 700

City MILWAUKEE State WI Zip Code 53204

Purpose of Disbursement  
TELEMARKETING

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
0	3		0	5		2	0	1	4

Transaction ID : 2014M04L21A00396

Amount of Each Disbursement this Period

2	2	9	5	5	0
---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1	2	7	8	9	5	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TARGET OUTREACH INC.**

Mailing Address **TIMBERS BUILDING  
700 W. VIRGINIA STREET, SUITE 700**

City **MILWAUKEE** State **WI** Zip Code **53204**

Purpose of Disbursement  
**TELEMARKETING**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00397**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. TARGET OUTREACH INC.**

Mailing Address **TIMBERS BUILDING  
700 W. VIRGINIA STREET, SUITE 700**

City **MILWAUKEE** State **WI** Zip Code **53204**

Purpose of Disbursement  
**TELEMARKETING**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00398**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. TARGET OUTREACH INC.**

Mailing Address **TIMBERS BUILDING  
700 W. VIRGINIA STREET, SUITE 700**

City **MILWAUKEE** State **WI** Zip Code **53204**

Purpose of Disbursement  
**TELEMARKETING**

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21A00399**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TG FUNDRAISING**

Mailing Address PO BOX 13470

City PORTLAND State OR Zip Code 97213

Purpose of Disbursement  
FUNDRAISING SERVICES

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
0	3		0	5		2	0	1	4

Transaction ID : 2014M04L21A00400

Amount of Each Disbursement this Period

2	6	2	0	0	0	.	0	0
---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. TRANSAMERICA LIFE INSURANCE**

Mailing Address 1150 SOUTH OLIVE STREET

City LOS ANGELES State CA Zip Code 90015-2211

Purpose of Disbursement  
EMPLOYEE BENEFITS

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
0	3		1	4		2	0	1	4

Transaction ID : 2014M04L21A00401

Amount of Each Disbursement this Period

1	9	7	6	9	.	6	5
---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. TRANSAMERICA LIFE INSURANCE**

Mailing Address 1150 SOUTH OLIVE STREET

City LOS ANGELES State CA Zip Code 90015-2211

Purpose of Disbursement  
EMPLOYEE BENEFITS

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
0	3		3	1		2	0	1	4

Transaction ID : 2014M04L21A00402

Amount of Each Disbursement this Period

2	0	0	5	0	.	7	4
---	---	---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

4	2	4	4	0	.	3	9
---	---	---	---	---	---	---	---

**TOTAL** This Period (last page this line number only)..... ▶

4	2	4	4	0	.	3	9
---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TV ONE LLC**

Mailing Address 1010 WAYNE AVENUE

City SILVER SPRING State MD Zip Code 20910

Purpose of Disbursement  
MEDIA SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21A00403

Amount of Each Disbursement this Period

5400.00

Full Name (Last, First, Middle Initial)

**B. TWITTER,INC**

Mailing Address PO BOX 12027

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement  
MEDIA SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00404

Amount of Each Disbursement this Period

5367.67

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 2013 NETWORK PLACE

City CHICAGO State IL Zip Code 60673

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00405

Amount of Each Disbursement this Period

16889.79

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

27657.46

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UNITED STATES TREASURY**

Mailing Address 1500 PENN. AVE NW

City WASHINGTON State DC Zip Code 20220

Purpose of Disbursement  
TAXES

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  
03 / 11 / 2014

**Transaction ID : 2014M04L21A00406**

Amount of Each Disbursement this Period

794.00

Full Name (Last, First, Middle Initial)

**B. US MONITOR**

Mailing Address 86 MAPLE AVE

City NEW CITY State NY Zip Code 10956

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

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  
03 / 12 / 2014

**Transaction ID : 2014M04L21A00407**

Amount of Each Disbursement this Period

566.58

Full Name (Last, First, Middle Initial)

**C. US MONITOR**

Mailing Address 86 MAPLE AVE

City NEW CITY State NY Zip Code 10956

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

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  
03 / 19 / 2014

**Transaction ID : 2014M04L21A00408**

Amount of Each Disbursement this Period

128.16

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1488.74

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. US MONITOR**

Mailing Address 86 MAPLE AVE

City NEW CITY State NY Zip Code 10956

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

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
03		26		2014

**Transaction ID : 2014M04L21A00409**

Amount of Each Disbursement this Period

190.51
--------

Full Name (Last, First, Middle Initial)

**B. USPS ACCOUNTING SERVICE CENTER**

Mailing Address 2700 CAMPUS DRIVE

City SAN MATEO State CA Zip Code 94497

Purpose of Disbursement  
POSTAGE

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
03		04		2014

**Transaction ID : 2014M04L21A00410**

Amount of Each Disbursement this Period

150000.00
-----------

Full Name (Last, First, Middle Initial)

**C. USPS ACCOUNTING SERVICE CENTER**

Mailing Address 2700 CAMPUS DRIVE

City SAN MATEO State CA Zip Code 94497

Purpose of Disbursement  
POSTAGE

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
03		24		2014

**Transaction ID : 2014M04L21A00411**

Amount of Each Disbursement this Period

50000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

200190.51
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. USPS ACCOUNTING SERVICE CENTER**

Mailing Address 2700 CAMPUS DRIVE

City State Zip Code  
SAN MATEO CA 94497

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00412

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. VERIZON BUSINESS**

Mailing Address P O BOX 660794

City State Zip Code  
DALLAS TX 75266

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00413

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. VERIZON**

Mailing Address P O BOX 660720

City State Zip Code  
DALLAS TX 75266-0720

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00414

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. VERIZON**

Mailing Address P O BOX 660720

City DALLAS State TX Zip Code 75266-0720

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	4		

Transaction ID : 2014M04L21A00415

Amount of Each Disbursement this Period

7	7	.	5	9
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. VERIZON WIRELESS**

Mailing Address P O BOX 25505

City LEHIGH VALLEY State PA Zip Code 18002

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	4		

Transaction ID : 2014M04L21A00416

Amount of Each Disbursement this Period

9	2	8	3	.	9	5
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. VERIZON**

Mailing Address P O BOX 660720

City DALLAS State TX Zip Code 75266

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	6			2	0	1	4		

Transaction ID : 2014M04L21A00417

Amount of Each Disbursement this Period

5	7	0	3	.	3	1
---	---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1	5	0	6	.	8	5
---	---	---	---	---	---	---

--	--	--	--	--	--	--

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. VERIZON**

Mailing Address P O BOX 660720

City DALLAS State TX Zip Code 75266

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : 2014M04L21A00418

Amount of Each Disbursement this Period

70.83

Full Name (Last, First, Middle Initial)

**B. VERIZON**

Mailing Address P O BOX 4832

City TRENTON State NJ Zip Code 08650-4832

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00419

Amount of Each Disbursement this Period

768.24

Full Name (Last, First, Middle Initial)

**C. TARA WALL**

Mailing Address 850 JOHN CARLYLE STREET #155

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
MANAGEMENT CONSULTING SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00420

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5839.07

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WARFIELD AND WALSH INC**

Mailing Address 601 S. WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
MAIL PRODUCTION SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00421

Amount of Each Disbursement this Period

900.00

Full Name (Last, First, Middle Initial)

**B. WASHINGTON GAS**

Mailing Address P O BOX 37747

City PHILADELPHIA State PA Zip Code 19101

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00422

Amount of Each Disbursement this Period

1026.65

Full Name (Last, First, Middle Initial)

**C. RAY WASHBURNE**

Mailing Address 47 HIGHLAND PARK VILLAGE  
SUITE 200

City DALLAS State TX Zip Code 75205

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00423

Amount of Each Disbursement this Period

4061.30

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5987.95

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4333 Amon Carter Boulevard

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	05	/	2014

Transaction ID : 2014M04L21A00424M

Amount of Each Disbursement this Period

2566.10
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. AMTRAK**

Mailing Address 2955 MARKET ST

City PHILADELPHIA State PA Zip Code 19104

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	05	/	2014

Transaction ID : 2014M04L21A00425M

Amount of Each Disbursement this Period

418.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. METROPOLITAN CLUB**

Mailing Address 1700 H STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	05	/	2014

Transaction ID : 2014M04L21A00426M

Amount of Each Disbursement this Period

664.10
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[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00
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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. US AIRWAYS**

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 05 / 2014

Transaction ID : 2014M04L21A00427M

Amount of Each Disbursement this Period

278.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. RAY WASHBURNE**

Mailing Address 47 HIGHLAND PARK VILLAGE  
SUITE 200

City DALLAS State TX Zip Code 75205

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00428

Amount of Each Disbursement this Period

7925.08

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 4333 Amon Carter Boulevard

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 19 / 2014

Transaction ID : 2014M04L21A00429M

Amount of Each Disbursement this Period

5478.96

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7925.08

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HARRY CIPRIANI RESTAURANT**

Mailing Address 781 5TH AVENUE

City NEW YORK State NY Zip Code 10022

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	9			2	0	1	4		

Transaction ID : 2014M04L21A00430M

Amount of Each Disbursement this Period

3	4	8	.	8	6
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. SAVOYA**

Mailing Address 1845 WOODALL RODGERS FREEWAY  
SUITE 1725

City DALLAS State TX Zip Code 75201

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	9			2	0	1	4		

Transaction ID : 2014M04L21A00431M

Amount of Each Disbursement this Period

6	5	0	.	0	3
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. THE METROPOLITAN CLUB**

Mailing Address 1700 H STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	9			2	0	1	4		

Transaction ID : 2014M04L21A00432M

Amount of Each Disbursement this Period

1	0	3	.	9	7
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[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0	0	0	.	0	0
---	---	---	---	---	---

0	0	0	.	0	0
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WEBSTER & ASSOCIATES**

Mailing Address 49 MUSIC SQUARE WEST  
SUITES 503

City NASHVILLE State TN Zip Code 37203

Purpose of Disbursement  
ENTERTAINMENT SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00433

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. WEST PAYMENT CENTER**

Mailing Address P O BOX 6292

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement  
RESEARCH SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00434

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. WESTAR SATELLITE SERVICES**

Mailing Address PO BOX 974375

City DALLAS State TX Zip Code 75397

Purpose of Disbursement  
SATELLITE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21A00435

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WILEY REIN LLP**

Mailing Address 1776 K. STREET N.W.

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement  
LEGAL AND COMPLIANCE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

**Transaction ID : 2014M04L21A00436**

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

**B. RAPHAEL WILLIAMS**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

**Transaction ID : 2014M04L21A00437**

Amount of Each Disbursement this Period

-167.24

Full Name (Last, First, Middle Initial)

**C. RAPHAEL WILLIAMS**

Mailing Address 310 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
VOID CHECK - REISSUED

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

**Transaction ID : 2014M04L21A00438**

Amount of Each Disbursement this Period

-6.20

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5826.56

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. RAPHAEL WILLIAMS</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2014
Mailing Address 310 First Street SE		<b>Transaction ID : 2014M04L21A00439</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement TRANSPORTATION SERVICES	Amount of Each Disbursement this Period 6.20
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. RAPHAEL WILLIAMS</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2014
Mailing Address 310 First Street SE		<b>Transaction ID : 2014M04L21A00440</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement TRAVEL EXPENSES	Amount of Each Disbursement this Period 167.24
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WMATA</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2014
Mailing Address 600 5TH ST NW		<b>Transaction ID : 2014M04L21A00441</b>
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement EMPLOYEE BENEFITS	Amount of Each Disbursement this Period 2175.00
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2348.44
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WSSC**

Mailing Address 14501 SWEITZER LANE

City LAUREL State MD Zip Code 20707-5902

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : 2014M04L21A00442

Amount of Each Disbursement this Period

1863.47

Full Name (Last, First, Middle Initial)

**B. WYE RIVER COMMUNICATIONS LLC**

Mailing Address 134 WYE ROAD

City QUEENSTOWN State MD Zip Code 21658

Purpose of Disbursement  
PRINTING/GRAPHIC SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L21A00443

Amount of Each Disbursement this Period

4255.90

Full Name (Last, First, Middle Initial)

**C. WYE RIVER COMMUNICATIONS LLC**

Mailing Address 134 WYE ROAD

City QUEENSTOWN State MD Zip Code 21658

Purpose of Disbursement  
PRINTING/GRAPHIC SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00444

Amount of Each Disbursement this Period

4089.48

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

10208.85

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. XEROX CORPORATION**

Mailing Address P O BOX 827598

City PHILADELPHIA State PA Zip Code 19182

Purpose of Disbursement  
EQUIPMENT MAINTENANCE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21A00445

Amount of Each Disbursement this Period

10204.34

Full Name (Last, First, Middle Initial)

**B. XO COMMUNICATIONS**

Mailing Address 14239 COLLECTIONS CENTER DRIVE

City CHICAGO State IL Zip Code 60693

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21A00446

Amount of Each Disbursement this Period

6805.74

Full Name (Last, First, Middle Initial)

**C. MICHAEL J AMBROSINI**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00001

Amount of Each Disbursement this Period

1318.32

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

18328.40

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SARA W ARMSTRONG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : 2014M04L21BPA00002

Amount of Each Disbursement this Period

4721.31
---------

Full Name (Last, First, Middle Initial)

**B. BRITTANY S CARTER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : 2014M04L21BPA00003

Amount of Each Disbursement this Period

1273.91
---------

Full Name (Last, First, Middle Initial)

**C. MATTHEW D HAWKINS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : 2014M04L21BPA00004

Amount of Each Disbursement this Period

1429.01
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

7424.23
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KIMBERLY E MORRALL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00005**

Amount of Each Disbursement this Period

1215.47

Full Name (Last, First, Middle Initial)

**B. REINCE PRIEBUS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00006**

Amount of Each Disbursement this Period

6089.27

Full Name (Last, First, Middle Initial)

**C. MICHAEL S SHIELDS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00007**

Amount of Each Disbursement this Period

5445.86

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

12750.60

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ELIZABETH E STEIL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00008**

Amount of Each Disbursement this Period

1777.43

Full Name (Last, First, Middle Initial)

**B. KATHERINE BARBOUR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00009**

Amount of Each Disbursement this Period

1077.46

Full Name (Last, First, Middle Initial)

**C. SHARON DAY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00010**

Amount of Each Disbursement this Period

5353.92

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8605.81

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. VALERIE L DOWLING**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

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
03		31		2014

Transaction ID : 2014M04L21BPA00011

Amount of Each Disbursement this Period

2084.45
---------

Full Name (Last, First, Middle Initial)

**B. SAMUEL R SANCHEZ**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

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
03		31		2014

Transaction ID : 2014M04L21BPA00012

Amount of Each Disbursement this Period

1428.95
---------

Full Name (Last, First, Middle Initial)

**C. MICHAEL VALLANTE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

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
03		31		2014

Transaction ID : 2014M04L21BPA00013

Amount of Each Disbursement this Period

3883.74
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7397.14
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. REBECCA BR HEILIG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00014**

Amount of Each Disbursement this Period

1683.16

Full Name (Last, First, Middle Initial)

**B. KATIE S HRKMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00015**

Amount of Each Disbursement this Period

1176.36

Full Name (Last, First, Middle Initial)

**C. VICTORIA J. MAGUIRE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00016**

Amount of Each Disbursement this Period

3306.24

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6165.76

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ASHTON C DAVIS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00017

Amount of Each Disbursement this Period

1140.33

Full Name (Last, First, Middle Initial)

**B. ANNA D EPSTEIN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00018

Amount of Each Disbursement this Period

1140.33

Full Name (Last, First, Middle Initial)

**C. MARK ALAN ISAACSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00019

Amount of Each Disbursement this Period

1419.26

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3699.92

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SARAH M ISGUR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

**Transaction ID : 2014M04L21BPA00020**

Amount of Each Disbursement this Period

2904.79
---------

Full Name (Last, First, Middle Initial)

**B. KIRSTEN A KUKOWSKI**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

**Transaction ID : 2014M04L21BPA00021**

Amount of Each Disbursement this Period

2820.06
---------

Full Name (Last, First, Middle Initial)

**C. ROBERT LOCKWOOD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

**Transaction ID : 2014M04L21BPA00022**

Amount of Each Disbursement this Period

2001.88
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7726.73
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RYAN C MAHONEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00023

Amount of Each Disbursement this Period

1979.80

Full Name (Last, First, Middle Initial)

**B. ALELI PARDO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00024

Amount of Each Disbursement this Period

1364.51

Full Name (Last, First, Middle Initial)

**C. JOHANNA E PERSING**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00025

Amount of Each Disbursement this Period

1229.61

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4573.92

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ISABEL SANTA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00026

Amount of Each Disbursement this Period

2505.19

Full Name (Last, First, Middle Initial)

**B. MICHAEL C SHORT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00027

Amount of Each Disbursement this Period

1830.50

Full Name (Last, First, Middle Initial)

**C. SEAN SPICER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00028

Amount of Each Disbursement this Period

4891.46

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

9227.15

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TARA J WALL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00029**

Amount of Each Disbursement this Period

4030.44

Full Name (Last, First, Middle Initial)

**B. ELEANOR B WALLACE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00030**

Amount of Each Disbursement this Period

1642.89

Full Name (Last, First, Middle Initial)

**C. ORLANDO J WATSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00031**

Amount of Each Disbursement this Period

2097.45

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7770.78

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. RAPHAEL L WILLIAMS</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address 310 FIRST STREET SE		<b>Transaction ID : 2014M04L21BPA00032</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement PAYROLL	Amount of Each Disbursement this Period 1592.50
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LAUREN M HERNANDEZ</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address 310 FIRST STREET SE		<b>Transaction ID : 2014M04L21BPA00033</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement PAYROLL	Amount of Each Disbursement this Period 1235.04
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MATTHEW J MAZZONE</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address 310 FIRST STREET SE		<b>Transaction ID : 2014M04L21BPA00034</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement PAYROLL	Amount of Each Disbursement this Period 2008.88
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4836.42
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DENNIS R WRIGHT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

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
03		31		2014

Transaction ID : 2014M04L21BPA00035

Amount of Each Disbursement this Period

2869.72
---------

Full Name (Last, First, Middle Initial)

**B. KRISTOPHER E ANDERSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

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
03		31		2014

Transaction ID : 2014M04L21BPA00036

Amount of Each Disbursement this Period

3138.00
---------

Full Name (Last, First, Middle Initial)

**C. JESSICA S DUSSAULT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

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
03		31		2014

Transaction ID : 2014M04L21BPA00037

Amount of Each Disbursement this Period

1509.45
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

7517.17
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MOLLY T HARP**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00038**

Amount of Each Disbursement this Period

1121.83

Full Name (Last, First, Middle Initial)

**B. ADAM R KENNEDY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00039**

Amount of Each Disbursement this Period

1498.74

Full Name (Last, First, Middle Initial)

**C. SALLY M LEACH**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00040**

Amount of Each Disbursement this Period

1076.73

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3697.30

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. EDWARD T MURPHY**

Date of Disbursement: MM / DD / YYYY  
03 / 31 / 2014

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : 2014M04L21BPA00041

Amount of Each Disbursement this Period: 2026.26

Full Name (Last, First, Middle Initial)  
**B. WEBBER E STEINHOFF**

Date of Disbursement: MM / DD / YYYY  
03 / 31 / 2014

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : 2014M04L21BPA00042

Amount of Each Disbursement this Period: 2394.85

Full Name (Last, First, Middle Initial)  
**C. JARED WHEELER**

Date of Disbursement: MM / DD / YYYY  
03 / 31 / 2014

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID : 2014M04L21BPA00043

Amount of Each Disbursement this Period: 1658.32

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6079.43

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JAHAN WILCOX**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00044

Amount of Each Disbursement this Period

2414.36

Full Name (Last, First, Middle Initial)

**B. DEAN W CLEARY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00045

Amount of Each Disbursement this Period

1490.83

Full Name (Last, First, Middle Initial)

**C. MATTHEW A KIRINCIC**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00046

Amount of Each Disbursement this Period

1074.20

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4979.39

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STEPHEN E SCHWARTZ**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00047

Amount of Each Disbursement this Period

1236.82

Full Name (Last, First, Middle Initial)

**B. STEPHANIE GROEN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00048

Amount of Each Disbursement this Period

1111.45

Full Name (Last, First, Middle Initial)

**C. STEVEN L CORDER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00049

Amount of Each Disbursement this Period

3618.88

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5967.15

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. GERI B SANDERS

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00050

Amount of Each Disbursement this Period

1676.73

Full Name (Last, First, Middle Initial)

### B. GORDON K SCHOEPFLE

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00051

Amount of Each Disbursement this Period

3211.87

Full Name (Last, First, Middle Initial)

### C. ANDREW STEWART

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00052

Amount of Each Disbursement this Period

1870.22

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6758.82

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CAROLINE J SWANN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00053**

Amount of Each Disbursement this Period

3510.95

Full Name (Last, First, Middle Initial)

**B. HANS COUTARD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00054**

Amount of Each Disbursement this Period

1434.34

Full Name (Last, First, Middle Initial)

**C. MICHAEL P OMEGNA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00055**

Amount of Each Disbursement this Period

2084.87

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7030.16

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANTOINE D SHORT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00056**

Amount of Each Disbursement this Period

1124.52

Full Name (Last, First, Middle Initial)

**B. MAURICE M MIDDLETON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00057**

Amount of Each Disbursement this Period

534.99

Full Name (Last, First, Middle Initial)

**C. TERRELL JAMES LEWIS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00058**

Amount of Each Disbursement this Period

974.03

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2633.54

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PERRY R SMITH JR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00059**

Amount of Each Disbursement this Period

386.16

Full Name (Last, First, Middle Initial)

**B. NANCY HOPE DEHLINGER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00060**

Amount of Each Disbursement this Period

1670.59

Full Name (Last, First, Middle Initial)

**C. DIRK E EYMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00061**

Amount of Each Disbursement this Period

3512.31

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5569.06

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL T GILDING**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00062**

Amount of Each Disbursement this Period

1982.38

Full Name (Last, First, Middle Initial)

**B. ANNETTE M BAKER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00063**

Amount of Each Disbursement this Period

3141.97

Full Name (Last, First, Middle Initial)

**C. OWEN M DORNEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00064**

Amount of Each Disbursement this Period

2050.38

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7174.73

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DAVID J DRUMMOND**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00065

Amount of Each Disbursement this Period

1560.11

Full Name (Last, First, Middle Initial)

**B. MADISON M HAGER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00066

Amount of Each Disbursement this Period

1219.09

Full Name (Last, First, Middle Initial)

**C. MARY E HAYES**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00067

Amount of Each Disbursement this Period

1829.50

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4608.70

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MALLORY G HUNTER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00068**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. CARA M MASON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00069**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. MICHAEL L MCCOLLUM**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00070**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MAGAN M MUNSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00071

Amount of Each Disbursement this Period

3599.15

Full Name (Last, First, Middle Initial)

**B. KATHERINE M WALSH**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00072

Amount of Each Disbursement this Period

5696.98

Full Name (Last, First, Middle Initial)

**C. RICHARD W WALTERS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00073

Amount of Each Disbursement this Period

1470.04

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

10766.17

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. MADELEINE E WESTERHOUT

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00074

Amount of Each Disbursement this Period

1036.29

Full Name (Last, First, Middle Initial)

### B. STEPHANIE B XU

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00075

Amount of Each Disbursement this Period

1139.48

Full Name (Last, First, Middle Initial)

### C. MONICA LOUISE JOHNSON

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00076

Amount of Each Disbursement this Period

579.84

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2755.61

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PHYLLIS M GREENE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21BPA00077

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. VICTORIA B HAMMOND**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21BPA00078

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ANNETTE R HENRY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21BPA00079

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TERESSA JACKSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00080**

Amount of Each Disbursement this Period

1776.12

Full Name (Last, First, Middle Initial)

**B. JEFFREY GORDON JOHNSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00081**

Amount of Each Disbursement this Period

1898.11

Full Name (Last, First, Middle Initial)

**C. CRYSTAL RENEE JOHNSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00082**

Amount of Each Disbursement this Period

2116.01

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5790.24

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MARTINE LAVEIST**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00083**

Amount of Each Disbursement this Period

1304.57

Full Name (Last, First, Middle Initial)

**B. EDWARD K LIPPMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00084**

Amount of Each Disbursement this Period

900.12

Full Name (Last, First, Middle Initial)

**C. MEGAN L NOVAK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00085**

Amount of Each Disbursement this Period

1259.22

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3463.91

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FRANCES M. PARKER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00086**

Amount of Each Disbursement this Period

1390.91

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER M PARKER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00087**

Amount of Each Disbursement this Period

1019.28

Full Name (Last, First, Middle Initial)

**C. TREVOR K PERSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00088**

Amount of Each Disbursement this Period

3799.64

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6209.83

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KATHERYN M PHILLIPS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00089

Amount of Each Disbursement this Period

1827.90

Full Name (Last, First, Middle Initial)

**B. GENE R PREZOCKI**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00090

Amount of Each Disbursement this Period

2111.80

Full Name (Last, First, Middle Initial)

**C. JAMES M ROWLEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00091

Amount of Each Disbursement this Period

5164.17

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

9103.87

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. NICHOLAS R SHARKEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00092

Amount of Each Disbursement this Period

2375.07

Full Name (Last, First, Middle Initial)

**B. MICHAEL A MEARS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00093

Amount of Each Disbursement this Period

3143.90

Full Name (Last, First, Middle Initial)

**C. ANNE M WAKE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00094

Amount of Each Disbursement this Period

1215.51

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6734.48

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BRUCE C CONNELLY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00095

Amount of Each Disbursement this Period

3755.30

Full Name (Last, First, Middle Initial)

**B. ROBERT B CRAWFORD JR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00096

Amount of Each Disbursement this Period

1690.23

Full Name (Last, First, Middle Initial)

**C. MARTIN A MCKISSICK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00097

Amount of Each Disbursement this Period

1819.87

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7265.40

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MARGARET R BOYD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00098**

Amount of Each Disbursement this Period

2494.62

Full Name (Last, First, Middle Initial)

**B. MOLLY DONLIN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00099**

Amount of Each Disbursement this Period

4328.45

Full Name (Last, First, Middle Initial)

**C. CHRISTOPHER MCNULTY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00100**

Amount of Each Disbursement this Period

5363.47

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

12186.54

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. PHILIP MATTHEW PINNELL**

Date of Disbursement: MM / DD / YYYY  
03 / 31 / 2014

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement: PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID : 2014M04L21BPA00101

Amount of Each Disbursement this Period: 3331.31

Category/Type

Full Name (Last, First, Middle Initial)  
**B. SHERRA L SCHOBORG**

Date of Disbursement: MM / DD / YYYY  
03 / 31 / 2014

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement: PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID : 2014M04L21BPA00102

Amount of Each Disbursement this Period: 1283.91

Category/Type

Full Name (Last, First, Middle Initial)  
**C. JILL B BARCLAY**

Date of Disbursement: MM / DD / YYYY  
03 / 31 / 2014

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement: PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID : 2014M04L21BPA00103

Amount of Each Disbursement this Period: 1459.63

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6074.85

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JENNIFER L BEHR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00104**

Amount of Each Disbursement this Period

2129.80

Full Name (Last, First, Middle Initial)

**B. JAMES GARCIA JR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00105**

Amount of Each Disbursement this Period

3255.19

Full Name (Last, First, Middle Initial)

**C. PETER F GRAVES**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00106**

Amount of Each Disbursement this Period

3321.09

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8706.08

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ELLIOTT Y HULSE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00107**

Amount of Each Disbursement this Period

1390.06

Full Name (Last, First, Middle Initial)

**B. MARK J JEFFERSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00108**

Amount of Each Disbursement this Period

3097.69

Full Name (Last, First, Middle Initial)

**C. JOSHUA KIVETT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00109**

Amount of Each Disbursement this Period

3157.81

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7645.56

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MATTHEW DONALD TERRILL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00110

Amount of Each Disbursement this Period

1389.04

Full Name (Last, First, Middle Initial)

**B. ANDREW J VARGAS VILA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00111

Amount of Each Disbursement this Period

1396.38

Full Name (Last, First, Middle Initial)

**C. TIFFANY A WATKINS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00112

Amount of Each Disbursement this Period

3019.95

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5805.37

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JONATHAN A GORMLEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00113

Amount of Each Disbursement this Period

2540.41

Full Name (Last, First, Middle Initial)

**B. JONATHAN BLACK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00114

Amount of Each Disbursement this Period

3183.94

Full Name (Last, First, Middle Initial)

**C. JASON M CHUNG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00115

Amount of Each Disbursement this Period

2715.93

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

8440.28

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. THOMAS C DICKENS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

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
03		31		2014

Transaction ID : 2014M04L21BPA00116

Amount of Each Disbursement this Period

2190.10
---------

Full Name (Last, First, Middle Initial)

**B. ELLIOTT ECHOLS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

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
03		31		2014

Transaction ID : 2014M04L21BPA00117

Amount of Each Disbursement this Period

1600.42
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Full Name (Last, First, Middle Initial)

**C. KRISTAL QUARKER HARTSFIELD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

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
03		31		2014

Transaction ID : 2014M04L21BPA00118

Amount of Each Disbursement this Period

2936.14
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6726.66
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ADAM P KINCAID**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00119

Amount of Each Disbursement this Period

1941.15

Full Name (Last, First, Middle Initial)

**B. JENNIFER S KORN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00120

Amount of Each Disbursement this Period

4967.35

Full Name (Last, First, Middle Initial)

**C. MATTHEW C MASON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00121

Amount of Each Disbursement this Period

4756.25

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

11664.75

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HANNAH J NUNEZ**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00122

Amount of Each Disbursement this Period

1459.66

Full Name (Last, First, Middle Initial)

**B. DANIEL C PERKINS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00123

Amount of Each Disbursement this Period

3377.81

Full Name (Last, First, Middle Initial)

**C. GREGORY A BAILOR JR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00124

Amount of Each Disbursement this Period

1961.81

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6799.28

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BRIAN D BARRETT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00125

Amount of Each Disbursement this Period

1827.38

Full Name (Last, First, Middle Initial)

**B. WILFREDO BATISTA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00126

Amount of Each Disbursement this Period

1968.20

Full Name (Last, First, Middle Initial)

**C. WAYNE W BRADLEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00127

Amount of Each Disbursement this Period

1917.68

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5713.26

**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)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANTHONY C ESPOSITIO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00128**

Amount of Each Disbursement this Period

1955.94

Full Name (Last, First, Middle Initial)

**B. STEPHEN FONG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00129**

Amount of Each Disbursement this Period

2607.24

Full Name (Last, First, Middle Initial)

**C. ALEJANDRO J GARCIA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00130**

Amount of Each Disbursement this Period

1871.01

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6434.19

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOHN E JACKSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00131

Amount of Each Disbursement this Period

2134.71

Full Name (Last, First, Middle Initial)

**B. IAN D LINDEMANN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00132

Amount of Each Disbursement this Period

1890.96

Full Name (Last, First, Middle Initial)

**C. KINYA R MINAMI**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00133

Amount of Each Disbursement this Period

1912.76

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5938.43

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ALYSSA A MOYER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00134

Amount of Each Disbursement this Period

2009.13

Full Name (Last, First, Middle Initial)

**B. CHAD F OLSEN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00135

Amount of Each Disbursement this Period

3103.72

Full Name (Last, First, Middle Initial)

**C. JOSE A OROZCO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00136

Amount of Each Disbursement this Period

1863.88

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6976.73

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. EARL L PHILIP**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00137**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. MICHAEL C SHIRLEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00138**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. CLINTON D SOFFER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00139**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HAYDEN W STONE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00140

Amount of Each Disbursement this Period

1849.85

Full Name (Last, First, Middle Initial)

**B. ROBERT MICHAEL TALBOT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00141

Amount of Each Disbursement this Period

1738.28

Full Name (Last, First, Middle Initial)

**C. JONATHON M TAYLOR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00142

Amount of Each Disbursement this Period

1014.78

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4602.91

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOHN W VINSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00143

Amount of Each Disbursement this Period

2047.87

Full Name (Last, First, Middle Initial)

**B. EVELEN H WALKER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00144

Amount of Each Disbursement this Period

2145.95

Full Name (Last, First, Middle Initial)

**C. CHRISTOPHER J YOUNG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00145

Amount of Each Disbursement this Period

1834.82

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6028.64

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BEKA ZERBST**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00146

Amount of Each Disbursement this Period

1097.35

Full Name (Last, First, Middle Initial)

**B. KATE L FAHERTY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00147

Amount of Each Disbursement this Period

515.76

Full Name (Last, First, Middle Initial)

**C. MARY C ALSFELD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00148

Amount of Each Disbursement this Period

2188.16

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3801.27

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LORI BROWNLEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00149

Amount of Each Disbursement this Period

2668.58

Full Name (Last, First, Middle Initial)

**B. SONDR A M CLARK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00150

Amount of Each Disbursement this Period

2212.66

Full Name (Last, First, Middle Initial)

**C. THERESA A DELUCA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00151

Amount of Each Disbursement this Period

1199.76

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6081.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LAUREN E DEVOLL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00152

Amount of Each Disbursement this Period

1165.01

Full Name (Last, First, Middle Initial)

**B. IAN H GRAY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00153

Amount of Each Disbursement this Period

1318.29

Full Name (Last, First, Middle Initial)

**C. JOHN S HORNEMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00154

Amount of Each Disbursement this Period

2494.81

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4978.11

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JUSTIN V LOFRANCO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00155

Amount of Each Disbursement this Period

2655.87

Full Name (Last, First, Middle Initial)

**B. GEORGE PARMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00156

Amount of Each Disbursement this Period

2442.44

Full Name (Last, First, Middle Initial)

**C. COOPER N REVES**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00157

Amount of Each Disbursement this Period

1396.39

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6494.70

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JACQUELINE N RIVERA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00158**

Amount of Each Disbursement this Period

1455.78

Full Name (Last, First, Middle Initial)

**B. TYLER D ROBERTS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00159**

Amount of Each Disbursement this Period

736.55

Full Name (Last, First, Middle Initial)

**C. ZACHARY H STITES**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

**Transaction ID : 2014M04L21BPA00160**

Amount of Each Disbursement this Period

2124.51

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4316.84

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. EDWARD P QUINN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00161

Amount of Each Disbursement this Period

807.50

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER J BAKER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00162

Amount of Each Disbursement this Period

1184.91

Full Name (Last, First, Middle Initial)

**C. DARREN K BOLDING**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00163

Amount of Each Disbursement this Period

4235.68

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6228.09

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ASHLEY M BURNS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00164

Amount of Each Disbursement this Period

7175.55

Full Name (Last, First, Middle Initial)

**B. JESSE E KAMZOL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00165

Amount of Each Disbursement this Period

2949.40

Full Name (Last, First, Middle Initial)

**C. CONOR J MAGUIRE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00166

Amount of Each Disbursement this Period

1490.83

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7175.55

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ARCHANA MEHTA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00167

Amount of Each Disbursement this Period

3682.12

Full Name (Last, First, Middle Initial)

**B. PURAN C NEBHANI**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00168

Amount of Each Disbursement this Period

3773.76

Full Name (Last, First, Middle Initial)

**C. ANDREW Q NGUYEN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00169

Amount of Each Disbursement this Period

5702.65

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

13158.53

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LIAM C O'ROURKE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00170

Amount of Each Disbursement this Period

1944.51

Full Name (Last, First, Middle Initial)

**B. AZARIAS M REDA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00171

Amount of Each Disbursement this Period

11337.65

Full Name (Last, First, Middle Initial)

**C. HUBERT Y SHANG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00172

Amount of Each Disbursement this Period

1925.42

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

15207.58

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BRANDON P VIDRINE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00173

Amount of Each Disbursement this Period

2542.93

Full Name (Last, First, Middle Initial)

**B. BRADLEY J WALP**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00174

Amount of Each Disbursement this Period

2094.03

Full Name (Last, First, Middle Initial)

**C. JAMES T BROWN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00175

Amount of Each Disbursement this Period

3443.90

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8080.86

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CHARLES J DEFEO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00176

Amount of Each Disbursement this Period

6150.09

Full Name (Last, First, Middle Initial)

**B. ANNE E THOMAS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00177

Amount of Each Disbursement this Period

1301.39

Full Name (Last, First, Middle Initial)

**C. ROBERT BENNETT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00178

Amount of Each Disbursement this Period

972.71

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8424.19

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STEPHEN C HAWLEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00179

Amount of Each Disbursement this Period

986.66

Full Name (Last, First, Middle Initial)

**B. JOHN R PHILLIPPE JR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00180

Amount of Each Disbursement this Period

3243.18

Full Name (Last, First, Middle Initial)

**C. DAVID M POWERS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00181

Amount of Each Disbursement this Period

2947.81

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7177.65

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOSEPH N RESTA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00182

Amount of Each Disbursement this Period

1080.87

Full Name (Last, First, Middle Initial)

**B. ASHLEY K STOW**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00183

Amount of Each Disbursement this Period

2909.88

Full Name (Last, First, Middle Initial)

**C. JENNIFER VOLDNESS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21BPA00184

Amount of Each Disbursement this Period

1663.95

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5654.70

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL T WILD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00185**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. MICHAEL J AMBROSINI**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00186**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. SARA W ARMSTRONG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00187**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BRITTANY S CARTER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00188

Amount of Each Disbursement this Period

1279.61

Full Name (Last, First, Middle Initial)

**B. MATTHEW D HAWKINS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00189

Amount of Each Disbursement this Period

1429.02

Full Name (Last, First, Middle Initial)

**C. KIMBERLY E MORRALL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00190

Amount of Each Disbursement this Period

1215.46

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3924.09

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. REINCE PRIEBUS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00191

Amount of Each Disbursement this Period

6089.26

Full Name (Last, First, Middle Initial)

**B. MICHAEL S SHIELDS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00192

Amount of Each Disbursement this Period

5445.87

Full Name (Last, First, Middle Initial)

**C. ELIZABETH E STEIL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00193

Amount of Each Disbursement this Period

2174.44

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

13709.57

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KATHERINE BARBOUR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00194

Amount of Each Disbursement this Period

1077.45

Full Name (Last, First, Middle Initial)

**B. SHARON DAY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00195

Amount of Each Disbursement this Period

5353.91

Full Name (Last, First, Middle Initial)

**C. VALERIE L DOWLING**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00196

Amount of Each Disbursement this Period

2084.44

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8515.80

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SAMUEL R SANCHEZ**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00197

Amount of Each Disbursement this Period

1428.96

Full Name (Last, First, Middle Initial)

**B. MICHAEL VALLANTE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00198

Amount of Each Disbursement this Period

3883.75

Full Name (Last, First, Middle Initial)

**C. REBECCA BR HEILIG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00199

Amount of Each Disbursement this Period

1683.17

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6995.88

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KATIE S HRKMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00200

Amount of Each Disbursement this Period

1083.29

Full Name (Last, First, Middle Initial)

**B. VICTORIA J. MAGUIRE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00201

Amount of Each Disbursement this Period

2495.85

Full Name (Last, First, Middle Initial)

**C. JASON M CHUNG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00202

Amount of Each Disbursement this Period

2475.55

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6054.69

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ASHTON C DAVIS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00203

Amount of Each Disbursement this Period

1140.33

Full Name (Last, First, Middle Initial)

**B. ANNA D EPSTEIN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00204

Amount of Each Disbursement this Period

1104.65

Full Name (Last, First, Middle Initial)

**C. MARK ALAN ISAACSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00205

Amount of Each Disbursement this Period

1366.90

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3611.88

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SARAH M ISGUR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00206

Amount of Each Disbursement this Period

2904.81

Full Name (Last, First, Middle Initial)

**B. KIRSTEN A KUKOWSKI**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00207

Amount of Each Disbursement this Period

2820.07

Full Name (Last, First, Middle Initial)

**C. ROBERT LOCKWOOD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00208

Amount of Each Disbursement this Period

2001.87

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7726.75

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RYAN C MAHONEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00209**

Amount of Each Disbursement this Period

1979.81

Full Name (Last, First, Middle Initial)

**B. ALELI PARDO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00210**

Amount of Each Disbursement this Period

1364.51

Full Name (Last, First, Middle Initial)

**C. JOHANNA E PERSING**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00211**

Amount of Each Disbursement this Period

1193.81

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4538.13

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ISABEL SANTA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21BPA00212

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. MICHAEL C SHORT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21BPA00213

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. SEAN SPICER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21BPA00214

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TARA J WALL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00215

Amount of Each Disbursement this Period

2032.62

Full Name (Last, First, Middle Initial)

**B. ELEANOR B WALLACE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00216

Amount of Each Disbursement this Period

1688.62

Full Name (Last, First, Middle Initial)

**C. ORLANDO J WATSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00217

Amount of Each Disbursement this Period

2068.02

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5789.26

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RAPHAEL L WILLIAMS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00218

Amount of Each Disbursement this Period

1592.50

Full Name (Last, First, Middle Initial)

**B. LAUREN M HERNANDEZ**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00219

Amount of Each Disbursement this Period

1144.28

Full Name (Last, First, Middle Initial)

**C. MATTHEW J MAZZONE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00220

Amount of Each Disbursement this Period

2008.89

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4745.67

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DENNIS R WRIGHT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00221

Amount of Each Disbursement this Period

2879.19

Full Name (Last, First, Middle Initial)

**B. KRISTOPHER E ANDERSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00222

Amount of Each Disbursement this Period

3138.00

Full Name (Last, First, Middle Initial)

**C. JESSICA S DUSSAULT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00223

Amount of Each Disbursement this Period

1457.66

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7474.85

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MOLLY T HARP**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00224

Amount of Each Disbursement this Period

1050.23

Full Name (Last, First, Middle Initial)

**B. ADAM R KENNEDY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00225

Amount of Each Disbursement this Period

1498.73

Full Name (Last, First, Middle Initial)

**C. SALLY M LEACH**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00226

Amount of Each Disbursement this Period

1076.75

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3625.71

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. EDWARD T MURPHY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00227

Amount of Each Disbursement this Period

2026.27

Full Name (Last, First, Middle Initial)

**B. WEBBER E STEINHOFF**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00228

Amount of Each Disbursement this Period

2394.87

Full Name (Last, First, Middle Initial)

**C. JARED WHEELER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00229

Amount of Each Disbursement this Period

1658.31

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6079.45

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JAHAN WILCOX**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00230

Amount of Each Disbursement this Period

3677.49

Full Name (Last, First, Middle Initial)

**B. DEAN W CLEARY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00231

Amount of Each Disbursement this Period

1490.82

Full Name (Last, First, Middle Initial)

**C. MATTHEW A KIRINCIC**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00232

Amount of Each Disbursement this Period

1074.20

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6242.51

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STEPHEN E SCHWARTZ**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21BPA00233

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. STEPHANIE GROEN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21BPA00234

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. STEVEN L CORDER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21BPA00235

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. GERI B SANDERS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00236

Amount of Each Disbursement this Period

1684.70

Full Name (Last, First, Middle Initial)

**B. GORDON K SCHOEPFLE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00237

Amount of Each Disbursement this Period

3222.20

Full Name (Last, First, Middle Initial)

**C. ANDREW STEWART**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00238

Amount of Each Disbursement this Period

1815.91

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6722.81

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CAROLINE J SWANN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00239

Amount of Each Disbursement this Period

3528.36

Full Name (Last, First, Middle Initial)

**B. HANS COUTARD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00240

Amount of Each Disbursement this Period

1439.37

Full Name (Last, First, Middle Initial)

**C. MICHAEL P OMEGNA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00241

Amount of Each Disbursement this Period

2084.86

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7052.59

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANTOINE D SHORT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00242

Amount of Each Disbursement this Period

1127.87

Full Name (Last, First, Middle Initial)

**B. MAURICE M MIDDLETON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00243

Amount of Each Disbursement this Period

696.49

Full Name (Last, First, Middle Initial)

**C. TERRELL JAMES LEWIS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00244

Amount of Each Disbursement this Period

977.23

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2801.59

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PERRY R SMITH JR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00245

Amount of Each Disbursement this Period

386.15

Full Name (Last, First, Middle Initial)

**B. NANCY HOPE DEHLINGER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00246

Amount of Each Disbursement this Period

1679.30

Full Name (Last, First, Middle Initial)

**C. DIRK E EYMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00247

Amount of Each Disbursement this Period

3527.58

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5593.03

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL T GILDING**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

**Transaction ID : 2014M04L21BPA00248**

Amount of Each Disbursement this Period

1982.37
---------

Full Name (Last, First, Middle Initial)

**B. ANNETTE M BAKER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

**Transaction ID : 2014M04L21BPA00249**

Amount of Each Disbursement this Period

2813.31
---------

Full Name (Last, First, Middle Initial)

**C. OWEN M DORNEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

**Transaction ID : 2014M04L21BPA00250**

Amount of Each Disbursement this Period

2050.37
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6846.05
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DAVID J DRUMMOND**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00251

Amount of Each Disbursement this Period

1560.11

Full Name (Last, First, Middle Initial)

**B. MADISON M HAGER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00252

Amount of Each Disbursement this Period

1150.04

Full Name (Last, First, Middle Initial)

**C. MARY E HAYES**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00253

Amount of Each Disbursement this Period

1837.76

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4547.91

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MALLORY G HUNTER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00254

Amount of Each Disbursement this Period

1823.19

Full Name (Last, First, Middle Initial)

**B. CARA M MASON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00255

Amount of Each Disbursement this Period

3599.15

Full Name (Last, First, Middle Initial)

**C. MICHAEL L MCCOLLUM**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00256

Amount of Each Disbursement this Period

2295.51

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7717.85

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MAGAN M MUNSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00257

Amount of Each Disbursement this Period

3599.15

Full Name (Last, First, Middle Initial)

**B. KATHERINE M WALSH**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00258

Amount of Each Disbursement this Period

5696.97

Full Name (Last, First, Middle Initial)

**C. RICHARD W WALTERS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00259

Amount of Each Disbursement this Period

1511.59

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

10807.71

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MADELEINE E WESTERHOUT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00260

Amount of Each Disbursement this Period

1036.29

Full Name (Last, First, Middle Initial)

**B. STEPHANIE B XU**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00261

Amount of Each Disbursement this Period

1068.12

Full Name (Last, First, Middle Initial)

**C. MONICA LOUISE JOHNSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00262

Amount of Each Disbursement this Period

742.17

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2846.58

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PHYLLIS M GREENE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00263**

Amount of Each Disbursement this Period

1145.72

Full Name (Last, First, Middle Initial)

**B. VICTORIA B HAMMOND**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00264**

Amount of Each Disbursement this Period

1714.12

Full Name (Last, First, Middle Initial)

**C. ANNETTE R HENRY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00265**

Amount of Each Disbursement this Period

1995.06

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4854.90

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TERESSA JACKSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00266

Amount of Each Disbursement this Period

1776.12

Full Name (Last, First, Middle Initial)

**B. JEFFREY GORDON JOHNSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00267

Amount of Each Disbursement this Period

1905.93

Full Name (Last, First, Middle Initial)

**C. CRYSTAL RENEE JOHNSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00268

Amount of Each Disbursement this Period

2126.32

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5808.37

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MARTINE LAVEIST**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00269**

Amount of Each Disbursement this Period

1309.15

Full Name (Last, First, Middle Initial)

**B. EDWARD K LIPPMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00270**

Amount of Each Disbursement this Period

900.14

Full Name (Last, First, Middle Initial)

**C. MEGAN L NOVAK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00271**

Amount of Each Disbursement this Period

1259.22

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3468.51

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FRANCES M. PARKER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00272

Amount of Each Disbursement this Period

1397.37

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER M PARKER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00273

Amount of Each Disbursement this Period

1022.56

Full Name (Last, First, Middle Initial)

**C. TREVOR K PERSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00274

Amount of Each Disbursement this Period

3799.64

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6219.57

**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)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KATHERYN M PHILLIPS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00275

Amount of Each Disbursement this Period

1827.91

Full Name (Last, First, Middle Initial)

**B. GENE R PREZOCKI**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00276

Amount of Each Disbursement this Period

2047.86

Full Name (Last, First, Middle Initial)

**C. JAMES M ROWLEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00277

Amount of Each Disbursement this Period

5190.45

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

9066.22

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL A MEARS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00278**

Amount of Each Disbursement this Period

3143.90

Full Name (Last, First, Middle Initial)

**B. ANNE M WAKE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00279**

Amount of Each Disbursement this Period

1215.52

Full Name (Last, First, Middle Initial)

**C. BRUCE C CONNELLY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00280**

Amount of Each Disbursement this Period

3755.30

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8114.72

**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)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ROBERT B CRAWFORD JR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00281

Amount of Each Disbursement this Period

1690.25

Full Name (Last, First, Middle Initial)

**B. MARTIN A MCKISSICK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00282

Amount of Each Disbursement this Period

1819.86

Full Name (Last, First, Middle Initial)

**C. MARGARET R BOYD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00283

Amount of Each Disbursement this Period

2405.12

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5915.23

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MOLLY DONLIN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00284**

Amount of Each Disbursement this Period

3107.85

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER MCNULTY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00285**

Amount of Each Disbursement this Period

4870.86

Full Name (Last, First, Middle Initial)

**C. PHILIP MATTHEW PINNELL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00286**

Amount of Each Disbursement this Period

3331.30

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

11310.01

**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)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SHERRA L SCHOBORG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00287

Amount of Each Disbursement this Period

1283.91

Full Name (Last, First, Middle Initial)

**B. JILL B BARCLAY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00288

Amount of Each Disbursement this Period

1425.20

Full Name (Last, First, Middle Initial)

**C. JENNIFER L BEHR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00289

Amount of Each Disbursement this Period

2129.81

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4838.92

**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)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JAMES GARCIA JR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00290**

Amount of Each Disbursement this Period

3255.19

Full Name (Last, First, Middle Initial)

**B. PETER F GRAVES**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00291**

Amount of Each Disbursement this Period

3321.10

Full Name (Last, First, Middle Initial)

**C. ELLIOTT Y HULSE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00292**

Amount of Each Disbursement this Period

1390.06

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7966.35

**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)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MARK J JEFFERSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00293

Amount of Each Disbursement this Period

3097.70

Full Name (Last, First, Middle Initial)

**B. JOSHUA KIVETT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00294

Amount of Each Disbursement this Period

3157.81

Full Name (Last, First, Middle Initial)

**C. MATTHEW DONALD TERRILL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00295

Amount of Each Disbursement this Period

1389.02

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7644.53

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANDREW J VARGAS VILA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00296**

Amount of Each Disbursement this Period

1396.39

Full Name (Last, First, Middle Initial)

**B. TIFFANY A WATKINS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00297**

Amount of Each Disbursement this Period

3019.94

Full Name (Last, First, Middle Initial)

**C. JONATHAN A GORMLEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00298**

Amount of Each Disbursement this Period

2540.41

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6956.74

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JONATHAN BLACK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00299**

Amount of Each Disbursement this Period

2438.40

Full Name (Last, First, Middle Initial)

**B. THOMAS C DICKENS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00300**

Amount of Each Disbursement this Period

2190.10

Full Name (Last, First, Middle Initial)

**C. ELLIOTT ECHOLS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00301**

Amount of Each Disbursement this Period

1600.42

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6228.92

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STEPHEN FONG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00302**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. KRISTAL QUARKER HARTSFIELD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00303**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ADAM P KINCAID**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00304**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JENNIFER S KORN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00305

Amount of Each Disbursement this Period

4967.34

Full Name (Last, First, Middle Initial)

**B. MATTHEW C MASON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00306

Amount of Each Disbursement this Period

4756.24

Full Name (Last, First, Middle Initial)

**C. HANNAH J NUNEZ**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00307

Amount of Each Disbursement this Period

1459.66

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

11183.24

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DANIEL C PERKINS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00308

Amount of Each Disbursement this Period

3393.85

Full Name (Last, First, Middle Initial)

**B. GREGORY A BAILOR JR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00309

Amount of Each Disbursement this Period

1961.81

Full Name (Last, First, Middle Initial)

**C. BRIAN D BARRETT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00310

Amount of Each Disbursement this Period

1827.39

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7183.05

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WILFREDO BATISTA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00311

Amount of Each Disbursement this Period

1968.20

Full Name (Last, First, Middle Initial)

**B. WAYNE W BRADLEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00312

Amount of Each Disbursement this Period

1917.69

Full Name (Last, First, Middle Initial)

**C. ANTHONY C ESPOSITIO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00313

Amount of Each Disbursement this Period

1955.93

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5841.82

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ALEJANDRO J GARCIA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00314**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. JOHN E JACKSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00315**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. IAN D LINDEMANN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00316**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KINYA R MINAMI**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00317

Amount of Each Disbursement this Period

1912.76

Full Name (Last, First, Middle Initial)

**B. ALYSSA A MOYER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00318

Amount of Each Disbursement this Period

2009.14

Full Name (Last, First, Middle Initial)

**C. CHAD F OLSEN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00319

Amount of Each Disbursement this Period

3103.71

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7025.61

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOSE A OROZCO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00320**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. EARL L PHILIP**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00321**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. MICHAEL C SHIRLEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21BPA00322**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. CLINTON D SOFFER

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00323

Amount of Each Disbursement this Period

1752.15

Full Name (Last, First, Middle Initial)

### B. HAYDEN W STONE

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00324

Amount of Each Disbursement this Period

1849.87

Full Name (Last, First, Middle Initial)

### C. ROBERT MICHAEL TALBOT

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00325

Amount of Each Disbursement this Period

1738.28

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5340.30

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JONATHON M TAYLOR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00326

Amount of Each Disbursement this Period

1014.79

Full Name (Last, First, Middle Initial)

**B. JOHN W VINSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00327

Amount of Each Disbursement this Period

2047.86

Full Name (Last, First, Middle Initial)

**C. EVELEN H WALKER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00328

Amount of Each Disbursement this Period

2145.95

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5208.60

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CHRISTOPHER J YOUNG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00329

Amount of Each Disbursement this Period

1834.82

Full Name (Last, First, Middle Initial)

**B. BEKA ZERBST**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00330

Amount of Each Disbursement this Period

1097.34

Full Name (Last, First, Middle Initial)

**C. KATE L FAHERTY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00331

Amount of Each Disbursement this Period

720.93

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3653.09

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MARY C ALSFELD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00332

Amount of Each Disbursement this Period

2188.16

Full Name (Last, First, Middle Initial)

**B. LORI BROWNLEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00333

Amount of Each Disbursement this Period

2668.58

Full Name (Last, First, Middle Initial)

**C. SONDR A M CLARK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00334

Amount of Each Disbursement this Period

2212.66

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7069.40

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. THERESA A DELUCA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00335

Amount of Each Disbursement this Period

1199.78

Full Name (Last, First, Middle Initial)

**B. LAUREN E DEVOLL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00335

Amount of Each Disbursement this Period

1165.00

Full Name (Last, First, Middle Initial)

**C. IAN H GRAY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00337

Amount of Each Disbursement this Period

1318.29

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3683.07

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOHN S HORNEMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00338

Amount of Each Disbursement this Period

2494.79

Full Name (Last, First, Middle Initial)

**B. JUSTIN V LOFRANCO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00339

Amount of Each Disbursement this Period

2655.88

Full Name (Last, First, Middle Initial)

**C. GEORGE PARMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00340

Amount of Each Disbursement this Period

2442.44

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7593.11

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COOPER N REVES**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00341

Amount of Each Disbursement this Period

1396.39

Full Name (Last, First, Middle Initial)

**B. JACQUELINE N RIVERA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00342

Amount of Each Disbursement this Period

2179.09

Full Name (Last, First, Middle Initial)

**C. ZACHARY H STITES**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00343

Amount of Each Disbursement this Period

2124.52

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5700.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. EDWARD P QUINN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00344

Amount of Each Disbursement this Period

653.92

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER J BAKER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00345

Amount of Each Disbursement this Period

1184.90

Full Name (Last, First, Middle Initial)

**C. ASHLEY M BURNS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00346

Amount of Each Disbursement this Period

1413.75

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3252.57

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JESSE E KAMZOL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00347

Amount of Each Disbursement this Period

2964.12

Full Name (Last, First, Middle Initial)

**B. CONOR J MAGUIRE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00348

Amount of Each Disbursement this Period

1490.82

Full Name (Last, First, Middle Initial)

**C. PURAN C NEBHANI**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00349

Amount of Each Disbursement this Period

3773.74

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8228.68

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LIAM C O'ROURKE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00350

Amount of Each Disbursement this Period

1953.40

Full Name (Last, First, Middle Initial)

**B. AZARIAS M REDA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00351

Amount of Each Disbursement this Period

4733.51

Full Name (Last, First, Middle Initial)

**C. HUBERT Y SHANG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00352

Amount of Each Disbursement this Period

1845.33

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8532.24

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BRANDON P VIDRINE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2014

Transaction ID : 2014M04L21BPA00353

Amount of Each Disbursement this Period

2542.93
---------

Full Name (Last, First, Middle Initial)

**B. BRADLEY J WALP**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2014

Transaction ID : 2014M04L21BPA00354

Amount of Each Disbursement this Period

2103.98
---------

Full Name (Last, First, Middle Initial)

**C. JAMES T BROWN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2014

Transaction ID : 2014M04L21BPA00355

Amount of Each Disbursement this Period

3443.90
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

8090.81
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CHARLES J DEFEO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21BPA00356

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. ANNE E THOMAS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21BPA00357

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ROBERT BENNETT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21BPA00358

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STEPHEN C HAWLEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00359

Amount of Each Disbursement this Period

950.99

Full Name (Last, First, Middle Initial)

**B. JOHN R PHILLIPPE JR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00360

Amount of Each Disbursement this Period

3236.43

Full Name (Last, First, Middle Initial)

**C. DAVID M POWERS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00361

Amount of Each Disbursement this Period

2947.82

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7135.24

# 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. JOSEPH N RESTA

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00362

Amount of Each Disbursement this Period

1080.86

Full Name (Last, First, Middle Initial)

### B. ASHLEY K STOW

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00363

Amount of Each Disbursement this Period

2909.88

Full Name (Last, First, Middle Initial)

### C. JENNIFER VOLDNESS

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : 2014M04L21BPA00364

Amount of Each Disbursement this Period

1617.74

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5608.48

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL T WILD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

**Transaction ID : 2014M04L21BPA00365**

Amount of Each Disbursement this Period

2810.49

Full Name (Last, First, Middle Initial)

**B. ALELI PARDO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140001**

Amount of Each Disbursement this Period

19.10

Full Name (Last, First, Middle Initial)

**C. ANNE E THOMAS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140003**

Amount of Each Disbursement this Period

35.67

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2865.26

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BRITTANY S CARTER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140006**

Amount of Each Disbursement this Period

31.24

Full Name (Last, First, Middle Initial)

**B. ROBERT B CRAWFORD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140007**

Amount of Each Disbursement this Period

297.29

Full Name (Last, First, Middle Initial)

**C. MARTIN A MCKISSICK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140015**

Amount of Each Disbursement this Period

46.89

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

375.42

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MARTIN A MCKISSICK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

Transaction ID : 2014M04L21CE0140016

Amount of Each Disbursement this Period

17.64

Full Name (Last, First, Middle Initial)

**B. US POSTAL SERVICE**

Mailing Address 1601 ASSEMBLY ST

City COLUMBIA State SC Zip Code 29201

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

Transaction ID : 2014M04L21CE0140016M

Amount of Each Disbursement this Period

17.64

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. MARTIN A MCKISSICK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

Transaction ID : 2014M04L21CE0140017

Amount of Each Disbursement this Period

684.91

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

702.55

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HAMPTON INN & SUITES**

Mailing Address 1975 N. DRUID HILLS ROAD

City ATLANTA State GA Zip Code 30329

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2014

Transaction ID : 2014M04L21CE0140019M

Amount of Each Disbursement this Period

299.98

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. MARTIN A MCKISSICK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2014

Transaction ID : 2014M04L21CE0140028

Amount of Each Disbursement this Period

113.68

Full Name (Last, First, Middle Initial)

**C. ELLIOTT A ECHOLS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2014

Transaction ID : 2014M04L21CE0140029

Amount of Each Disbursement this Period

67.95

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

181.63

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ELLIOTT A ECHOLS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

Transaction ID : 2014M04L21CE0140030

Amount of Each Disbursement this Period

77.69

Full Name (Last, First, Middle Initial)

**B. ELEANOR B WALLACE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

Transaction ID : 2014M04L21CE0140033

Amount of Each Disbursement this Period

55.64

Full Name (Last, First, Middle Initial)

**C. GORDON K SCHOEPFLE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

Transaction ID : 2014M04L21CE0140034

Amount of Each Disbursement this Period

175.72

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

309.05

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOHN R PHILLIPPE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140036**

Amount of Each Disbursement this Period

36.86

Full Name (Last, First, Middle Initial)

**B. JILLIAN B ROGERS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140039**

Amount of Each Disbursement this Period

101.08

Full Name (Last, First, Middle Initial)

**C. AMAZON.COM**

Mailing Address 1200 12TH AVE S. SUITE 1200

City SEATTLE State WA Zip Code 98109

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  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140039M**

Amount of Each Disbursement this Period

101.08

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

137.94

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JILLIAN B ROGERS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : 2014M04L21CE0140040

Amount of Each Disbursement this Period

87.86
-------

Full Name (Last, First, Middle Initial)

**B. JILLIAN B ROGERS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : 2014M04L21CE0140041

Amount of Each Disbursement this Period

73.92
-------

Full Name (Last, First, Middle Initial)

**C. KATHERINE M WALSH**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : 2014M04L21CE0140048

Amount of Each Disbursement this Period

22.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

183.78
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL J AMBROSINI**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2014

Transaction ID : 2014M04L21CE0140049

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**B. MARGARET R BOYD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2014

Transaction ID : 2014M04L21CE0140050

Amount of Each Disbursement this Period

87.86

Full Name (Last, First, Middle Initial)

**C. MATTHEW D HAWKINS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 10 / 2014

Transaction ID : 2014M04L21CE0140051

Amount of Each Disbursement this Period

21.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

123.86

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. MARK ISAACSON

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	0			2	0	1	4		

Transaction ID : 2014M04L21CE0140052

Amount of Each Disbursement this Period

6	5	.	3	8
---	---	---	---	---

Full Name (Last, First, Middle Initial)

### B. MAGAN M MUNSON

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	0			2	0	1	4		

Transaction ID : 2014M04L21CE0140053

Amount of Each Disbursement this Period

2	3	9	.	0	4
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

### C. UBER

Mailing Address 182 HOWARD ST. #8

City SAN FRANCISCO State CA Zip Code 94102

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	0			2	0	1	4		

Transaction ID : 2014M04L21CE0140053M

Amount of Each Disbursement this Period

2	3	9	.	0	4
---	---	---	---	---	---

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3	0	4	.	4	2
---	---	---	---	---	---

3	0	4	.	4	2
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL A VALLANTE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140058**

Amount of Each Disbursement this Period

110.00

Full Name (Last, First, Middle Initial)

**B. MICHAEL A VALLANTE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140059**

Amount of Each Disbursement this Period

590.99

Full Name (Last, First, Middle Initial)

**C. US AIRWAYS**

Mailing Address 111 W. RIO SALADO PARKWAY

City TEMPE State AZ Zip Code 85281

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140059M**

Amount of Each Disbursement this Period

493.00

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

700.99

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. OWEN M DORNEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140064**

Amount of Each Disbursement this Period

150.60

Full Name (Last, First, Middle Initial)

**B. REBECCA B HEILIG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140066**

Amount of Each Disbursement this Period

55.35

Full Name (Last, First, Middle Initial)

**C. RICHARD W WALTERS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140071**

Amount of Each Disbursement this Period

86.87

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

292.82

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RICHARD W WALTERS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140072**

Amount of Each Disbursement this Period

96.11

Full Name (Last, First, Middle Initial)

**B. SARAH M FLORES**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140075**

Amount of Each Disbursement this Period

53.31

Full Name (Last, First, Middle Initial)

**C. SHERRA L SCHOBORG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

**Transaction ID : 2014M04L21CE0140076**

Amount of Each Disbursement this Period

87.86

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

237.28

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JAMES BROWN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

Transaction ID : 2014M04L21CE0140077

Amount of Each Disbursement this Period

159.66

Full Name (Last, First, Middle Initial)

**B. VICTORIA J MAGUIRE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

Transaction ID : 2014M04L21CE0140079

Amount of Each Disbursement this Period

222.05

Full Name (Last, First, Middle Initial)

**C. ANNETTE M BAKER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150001

Amount of Each Disbursement this Period

7.50

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

389.21

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANNETTE M BAKER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150002**

Amount of Each Disbursement this Period

406.32

Full Name (Last, First, Middle Initial)

**B. MARRIOTT HOTELS**

Mailing Address 6161 WEST CENTURY BLVD.

City LOS ANGELES State CA Zip Code 90045

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150002M**

Amount of Each Disbursement this Period

257.85

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. ALEJANDRO J GARCIA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150011**

Amount of Each Disbursement this Period

17.12

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

423.44

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SHELL LUMBER & HARDWARE**

Mailing Address 2733 SW 27TH AVE

City MIAMI State FL Zip Code 33133

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 M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150011M

Amount of Each Disbursement this Period

17.12

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. ALEJANDRO J GARCIA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150012

Amount of Each Disbursement this Period

49.42

Full Name (Last, First, Middle Initial)

**C. ALEJANDRO J GARCIA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150014

Amount of Each Disbursement this Period

541.52

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

590.94

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AZARIAS M REDA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
REGISTRATION FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150015**

Amount of Each Disbursement this Period

3212.75

Full Name (Last, First, Middle Initial)

**B. MICHIGAN COMPUTER GROUP**

Mailing Address 500 S STATE ST

City ANN ARBOR State MI Zip Code 48109

Purpose of Disbursement  
REGISTRATION FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150015M**

Amount of Each Disbursement this Period

300.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. O'REILLY MEDIA**

Mailing Address PO BOX 39000

City SAN FRANCISCO State CA Zip Code 94139

Purpose of Disbursement  
REGISTRATION FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150016M**

Amount of Each Disbursement this Period

1796.00

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3212.75

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UNIVERSITY OF MARYLAND</b>		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address UNIVERSITY OF MD		Transaction ID : 2014M04L21CE0150017M
City COLLEGE PARK	State MD	
Zip Code 20742	Purpose of Disbursement REGISTRATION FEE	Amount of Each Disbursement this Period 350.00
Candidate Name	Category/Type	[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>B. UNIVERSITY OF MICHIGAN</b>		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address 500 S STATE ST		Transaction ID : 2014M04L21CE0150018M
City ANN ARBOR	State MI	
Zip Code 48109	Purpose of Disbursement REGISTRATION FEE	Amount of Each Disbursement this Period 766.75
Candidate Name	Category/Type	[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>C. AZARIAS M REDA</b>		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014
Mailing Address 310 FIRST STREET SE		Transaction ID : 2014M04L21CE0150020
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement SUBSCRIPTIONS	Amount of Each Disbursement this Period 820.00
Candidate Name	Category/Type	
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)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

820.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CRAIGSLIST**

Mailing Address 1381 9TH AVE

City SAN FRANCISCO State CA Zip Code 94122

Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150020M

Amount of Each Disbursement this Period

275.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. LINKEDIN**

Mailing Address 2029 STIERLIN CT

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150027M

Amount of Each Disbursement this Period

545.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. AZARIAS M REDA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150029

Amount of Each Disbursement this Period

70.95

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

70.95

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AZARIAS M REDA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PRINTING/GRAPHIC SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150034**

Amount of Each Disbursement this Period

376.34

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 715 D ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PRINTING/GRAPHIC SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150034M**

Amount of Each Disbursement this Period

50.45

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 3515 S JEFFERSON ST

City BAILEY'S CROSSROADS State VA Zip Code 22041

Purpose of Disbursement  
PRINTING/GRAPHIC SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150035M**

Amount of Each Disbursement this Period

47.70

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

376.34

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 2800 SOUTH STATE ST

City ANN ARBOR State MI Zip Code 48105

Purpose of Disbursement  
PRINTING/GRAPHIC SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150036M

Amount of Each Disbursement this Period

233.19

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. SLG PUBLISHING**

Mailing Address 44 RACE ST

City SAN JOSE State CA Zip Code 95113

Purpose of Disbursement  
PRINTING/GRAPHIC SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150037M

Amount of Each Disbursement this Period

45.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. AZARIAS M REDA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150038

Amount of Each Disbursement this Period

3873.29

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3873.29

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DOLLAR RENT A CAR**

Mailing Address PO BOX 33167

City TULSA State OK Zip Code 74153

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150044M

Amount of Each Disbursement this Period

238.69

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. MARRIOTT HOTELS**

Mailing Address 1770 S AMPHLETT BLVD

City SAN MATEO State CA Zip Code 94402

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150047M

Amount of Each Disbursement this Period

1460.68

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. RED ROOF INNS**

Mailing Address 777 AIRPORT BLVD

City BURLINGAME State CA Zip Code 94010

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150059M

Amount of Each Disbursement this Period

637.92

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CAPITAL LOUNGE**

Mailing Address 229 PENNSYLVANIA AVE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150079M

Amount of Each Disbursement this Period

264.89

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. AZARIAS M REDA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150102

Amount of Each Disbursement this Period

12.88

Full Name (Last, First, Middle Initial)

**C. ROBERT B CRAWFORD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150103

Amount of Each Disbursement this Period

531.19

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

544.07

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HAMPTON INNS**

Mailing Address 7060 LAKE DR.

City WEST DES MOINES State IA Zip Code 50266

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2014

Transaction ID : 2014M04L21CE0150103M

Amount of Each Disbursement this Period

390.12
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. ROBERT M TALBOT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2014

Transaction ID : 2014M04L21CE0150117

Amount of Each Disbursement this Period

205.46
--------

Full Name (Last, First, Middle Initial)

**C. BEST BUY**

Mailing Address 4229 E MCCAIN BLVD

City NORTH LITTLE ROCK State AR Zip Code 72117

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 M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2014

Transaction ID : 2014M04L21CE0150117M

Amount of Each Disbursement this Period

65.09
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[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

205.46
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LOWE'S**

Mailing Address 4233 WEST SUNSET AVE.

City SPRINGDALE State AR Zip Code 72762

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 M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2014

Transaction ID : 2014M04L21CE0150118M

Amount of Each Disbursement this Period

140.37
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. ROBERT M TALBOT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2014

Transaction ID : 2014M04L21CE0150119

Amount of Each Disbursement this Period

73.41
-------

Full Name (Last, First, Middle Initial)

**C. ROBERT M TALBOT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2014

Transaction ID : 2014M04L21CE0150120

Amount of Each Disbursement this Period

203.22
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

276.63
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ROBERT M TALBOT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150122**

Amount of Each Disbursement this Period

944.72

Full Name (Last, First, Middle Initial)

**B. MARY C ALSFELD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150131**

Amount of Each Disbursement this Period

86.00

Full Name (Last, First, Middle Initial)

**C. BRUCE C CONNELLY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150132**

Amount of Each Disbursement this Period

355.37

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1386.09

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BRUCE C CONNELLY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
REGISTRATION FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150136

Amount of Each Disbursement this Period

349.00

Full Name (Last, First, Middle Initial)

**B. AIPAC**

Mailing Address 801 MT VERNON PLACE

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
REGISTRATION FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150136M

Amount of Each Disbursement this Period

349.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. BRUCE C CONNELLY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150143

Amount of Each Disbursement this Period

256.48

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

605.48

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CHARLES J DEFEO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150146**

Amount of Each Disbursement this Period

127.70

Full Name (Last, First, Middle Initial)

**B. STEPHEN C HAWLEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150147**

Amount of Each Disbursement this Period

47.00

Full Name (Last, First, Middle Initial)

**C. CARA M MASON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150149**

Amount of Each Disbursement this Period

86.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

260.70

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CARA M MASON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150150

Amount of Each Disbursement this Period

134.57

Full Name (Last, First, Middle Initial)

**B. EARL L PHILIP**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150154

Amount of Each Disbursement this Period

113.68

Full Name (Last, First, Middle Initial)

**C. GREGORY A BAILOR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150156

Amount of Each Disbursement this Period

190.41

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

438.66

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HUBERT Y SHANG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150159

Amount of Each Disbursement this Period

199.00

Full Name (Last, First, Middle Initial)

**B. AMAZON.COM**

Mailing Address 1200 12TH AVE S. SUITE 1200

City SEATTLE State WA Zip Code 98109

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  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150159M

Amount of Each Disbursement this Period

199.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. JENNIFER L BEHR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150160

Amount of Each Disbursement this Period

591.05

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

790.05

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JASON M CHUNG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21CE0150171

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. JAMES GARCIA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21CE0150175

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. JAMES GARCIA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21CE0150176

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JUSTIN LOFRANCO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150190**

Amount of Each Disbursement this Period

351.44

Full Name (Last, First, Middle Initial)

**B. VERIZON**

Mailing Address PO BOX 4003

City ACWORTH State GA Zip Code 30101

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150190M**

Amount of Each Disbursement this Period

351.44

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. JUSTIN LOFRANCO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150194**

Amount of Each Disbursement this Period

16.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

367.44

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOSE A OROZCO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
REGISTRATION 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
03		17		2014

Transaction ID : 2014M04L21CE0150195

Amount of Each Disbursement this Period

175.00
--------

Full Name (Last, First, Middle Initial)

**B. ALBUQUERQUE HISPANO CHAMBER OF COMMERCE**

Mailing Address 1309 4TH ST. SW

City ALBUQUERQUE State NM Zip Code 87102

Purpose of Disbursement  
REGISTRATION 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
03		17		2014

Transaction ID : 2014M04L21CE0150195M

Amount of Each Disbursement this Period

175.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. JOSE A OROZCO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

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
03		17		2014

Transaction ID : 2014M04L21CE0150196

Amount of Each Disbursement this Period

526.40
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

701.40
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOHANNA PERSING**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150199**

Amount of Each Disbursement this Period

87.86

Full Name (Last, First, Middle Initial)

**B. JOHN R PHILLIPPE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150200**

Amount of Each Disbursement this Period

65.25

Full Name (Last, First, Middle Initial)

**C. JENNIFER L VOLDNESS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150202**

Amount of Each Disbursement this Period

40.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

193.11

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KRISTOPHER E ANDERSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
BOOKS AND SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150203

Amount of Each Disbursement this Period

10.99

Full Name (Last, First, Middle Initial)

**B. AMAZON.COM**

Mailing Address 1200 12TH AVE S. SUITE 1200

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement  
BOOKS AND SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150203M

Amount of Each Disbursement this Period

10.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. KIRSTEN A KUKOWSKI**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150204

Amount of Each Disbursement this Period

49.36

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

60.35

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LORI A WEBERG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150207

Amount of Each Disbursement this Period

172.00

Full Name (Last, First, Middle Initial)

**B. LORI A WEBERG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150209

Amount of Each Disbursement this Period

48.50

Full Name (Last, First, Middle Initial)

**C. LIAM C O'ROURKE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150213

Amount of Each Disbursement this Period

87.86

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

308.36

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL J AMBROSINI**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

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  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150214**

Amount of Each Disbursement this Period

176.38

Full Name (Last, First, Middle Initial)

**B. MOLLY K DONLIN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

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  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150217**

Amount of Each Disbursement this Period

143.87

Full Name (Last, First, Middle Initial)

**C. MATTHEW D HAWKINS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

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  
03 / 17 / 2014

**Transaction ID : 2014M04L21CE0150220**

Amount of Each Disbursement this Period

128.39

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

448.64

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MALLORY G HUNTER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150223

Amount of Each Disbursement this Period

72.99

Full Name (Last, First, Middle Initial)

**B. PHILIP M PINNELL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150224

Amount of Each Disbursement this Period

87.86

Full Name (Last, First, Middle Initial)

**C. PHILIP M PINNELL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150225

Amount of Each Disbursement this Period

259.05

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

419.90

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PHILIP M PINNELL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150238

Amount of Each Disbursement this Period

212.80

Full Name (Last, First, Middle Initial)

**B. MICHAEL C SHORT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150240

Amount of Each Disbursement this Period

175.72

Full Name (Last, First, Middle Initial)

**C. MICHAEL C SHORT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150242

Amount of Each Disbursement this Period

778.49

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1167.01

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UNITED AIRLINES**

Mailing Address PO BOX 66100

City State Zip Code  
CHICAGO IL 60666

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2014

Transaction ID : 2014M04L21CE0150245M

Amount of Each Disbursement this Period

536.49
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. MICHAEL A VALLANTE**

Mailing Address 310 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2014

Transaction ID : 2014M04L21CE0150253

Amount of Each Disbursement this Period

710.76
--------

Full Name (Last, First, Middle Initial)

**C. BROKEN YOLK CAFE**

Mailing Address 355 6TH AVENUE

City State Zip Code  
SAN DIEGO CA 92101

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2014

Transaction ID : 2014M04L21CE0150253M

Amount of Each Disbursement this Period

430.92
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[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

710.76
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RICHARD W WALTERS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2014

**Transaction ID : 2014M04L21CE0150263**

Amount of Each Disbursement this Period

177.85
--------

Full Name (Last, First, Middle Initial)

**B. SONDRA CLARK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2014

**Transaction ID : 2014M04L21CE0150265**

Amount of Each Disbursement this Period

172.00
--------

Full Name (Last, First, Middle Initial)

**C. SHARON L DAY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2014

**Transaction ID : 2014M04L21CE0150267**

Amount of Each Disbursement this Period

368.98
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

718.83
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SARAH M FLORES**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150274

Amount of Each Disbursement this Period

179.51

Full Name (Last, First, Middle Initial)

**B. SEAN M SPICER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150278

Amount of Each Disbursement this Period

117.83

Full Name (Last, First, Middle Initial)

**C. SEAN M SPICER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150279

Amount of Each Disbursement this Period

233.92

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

531.26

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TIFFANY A WATKINS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150285

Amount of Each Disbursement this Period

420.69

Full Name (Last, First, Middle Initial)

**B. VICTORIA J MAGUIRE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150299

Amount of Each Disbursement this Period

280.03

Full Name (Last, First, Middle Initial)

**C. SAFEWAY**

Mailing Address 490 L STREET NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : 2014M04L21CE0150299M

Amount of Each Disbursement this Period

280.03

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

700.72

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ADAM P KINCAID**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160001

Amount of Each Disbursement this Period

75.32

Full Name (Last, First, Middle Initial)

**B. ALYSSA A MOYER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160002

Amount of Each Disbursement this Period

633.92

Full Name (Last, First, Middle Initial)

**C. ANDREW J VARGAS VILA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160007

Amount of Each Disbursement this Period

113.94

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

823.18

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BRIAN D BARRETT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 2014M04L21CE0160009

Amount of Each Disbursement this Period

85.50
-------

Full Name (Last, First, Middle Initial)

**B. BRIAN D BARRETT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 2014M04L21CE0160010

Amount of Each Disbursement this Period

75.97
-------

Full Name (Last, First, Middle Initial)

**C. BRIAN D BARRETT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 2014M04L21CE0160014

Amount of Each Disbursement this Period

312.48
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

473.95
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ROBERT B CRAWFORD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 2014M04L21CE0160017**

Amount of Each Disbursement this Period

783.46

Full Name (Last, First, Middle Initial)

**B. HAMPTON INNS**

Mailing Address 2417 SOUTH CAROLYN AVE.

City SIOUX FALLS State SD Zip Code 57106

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 2014M04L21CE0160019M**

Amount of Each Disbursement this Period

476.11

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. BRUCE C CONNELLY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 2014M04L21CE0160036**

Amount of Each Disbursement this Period

1056.25

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1839.71

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COURTYARD BY MARRIOTT**

Mailing Address 2899 JEFFERSON DAVIS HWY

City State Zip Code  
CRYSTAL CITY VA 22202

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L21CE0160038M**

Amount of Each Disbursement this Period

361.74
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. BRUCE C CONNELLY**

Mailing Address 310 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L21CE0160061**

Amount of Each Disbursement this Period

533.68
--------

Full Name (Last, First, Middle Initial)

**C. CHARLES J DEFEO**

Mailing Address 310 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
FLORAL ARRANGEMENTS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	24	/	2014

**Transaction ID : 2014M04L21CE0160068**

Amount of Each Disbursement this Period

104.98
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

638.66
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. 1-800-FLOWERS**

Mailing Address ONE OLD COUNTRY ROAD, SUITE 500

City CARLE PLACE State NY Zip Code 11514

Purpose of Disbursement  
FLORAL ARRANGEMENTS

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
0	3			2	4			2	0	1	4		

Transaction ID : 2014M04L21CE0160068M

Amount of Each Disbursement this Period

1	0	4	.	9	8
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CHARLES J DEFEO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	4			2	0	1	4		

Transaction ID : 2014M04L21CE0160069

Amount of Each Disbursement this Period

7	0	.	5	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. AMAZON.COM**

Mailing Address 1200 12TH AVE S. SUITE 1200

City SEATTLE State WA Zip Code 98109

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	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	4			2	0	1	4		

Transaction ID : 2014M04L21CE0160069M

Amount of Each Disbursement this Period

7	0	.	5	0
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[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7	0	.	5	0
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7	0	.	5	0
---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CHARLES J DEFEO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 2014M04L21CE0160070**

Amount of Each Disbursement this Period

308.00

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER MCNULTY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 2014M04L21CE0160072**

Amount of Each Disbursement this Period

867.75

Full Name (Last, First, Middle Initial)

**C. VIRTUE- FEED AND GRAIN**

Mailing Address 106 S. UNION STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 2014M04L21CE0160072M**

Amount of Each Disbursement this Period

867.75

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1175.75

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CLINTON D SOFFER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 2014M04L21CE0160073**

Amount of Each Disbursement this Period

87.86

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. CLINTON D SOFFER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 2014M04L21CE0160074**

Amount of Each Disbursement this Period

108.98

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 1834 GARNET AVE

City SAN DIEGO State CA Zip Code 92109

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 2014M04L21CE0160074M**

Amount of Each Disbursement this Period

108.98

Category/  
Type

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

196.84

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CLINTON D SOFFER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160076

Amount of Each Disbursement this Period

123.04

Full Name (Last, First, Middle Initial)

**B. CHRISTOPER J YOUNG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160081

Amount of Each Disbursement this Period

333.20

Full Name (Last, First, Middle Initial)

**C. DIRK EYMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
COMPUTER EQUIPMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160083

Amount of Each Disbursement this Period

7211.18

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7667.42

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. APPLE**

Mailing Address 1100 SOUTH HAYES STREET

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement  
COMPUTER EQUIPMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	24	/	2014

Transaction ID : 2014M04L21CE0160083M

Amount of Each Disbursement this Period

7211.18
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. DIRK EYMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	24	/	2014

Transaction ID : 2014M04L21CE0160084

Amount of Each Disbursement this Period

2.00
------

Full Name (Last, First, Middle Initial)

**C. MARTIN A MCKISSICK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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 M	/	D D D	/	Y Y Y Y Y
03	/	24	/	2014

Transaction ID : 2014M04L21CE0160085

Amount of Each Disbursement this Period

74.34
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

76.34
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. OFFICE DEPOT**

Mailing Address 421 BUSH RIVER ROAD

City COLUMBIA State SC Zip Code 29210

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 M	/	D D D	/	Y Y Y Y Y
03	/	24	/	2014

Transaction ID : 2014M04L21CE0160085M

Amount of Each Disbursement this Period

74.34
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. MARTIN A MCKISSICK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	24	/	2014

Transaction ID : 2014M04L21CE0160086

Amount of Each Disbursement this Period

46.89
-------

Full Name (Last, First, Middle Initial)

**C. MARTIN A MCKISSICK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	24	/	2014

Transaction ID : 2014M04L21CE0160087

Amount of Each Disbursement this Period

551.37
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

598.26
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COURTYARD BY MARRIOTT**

Mailing Address 4641 KENMORE AVENUE

City ALEXANDRIA State VA Zip Code 22304

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 2014M04L21CE0160087M

Amount of Each Disbursement this Period

380.94
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. MARTIN A MCKISSICK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 2014M04L21CE0160093

Amount of Each Disbursement this Period

83.44
-------

Full Name (Last, First, Middle Initial)

**C. EARL L PHILIP**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 2014M04L21CE0160095

Amount of Each Disbursement this Period

151.38
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

234.82
--------

**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. EARL L PHILIP**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 2014M04L21CE0160100

Amount of Each Disbursement this Period

59.36
-------

Full Name (Last, First, Middle Initial)

**B. EDWARD P QUINN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 2014M04L21CE0160101

Amount of Each Disbursement this Period

199.96
--------

Full Name (Last, First, Middle Initial)

**C. AMAZON.COM**

Mailing Address 1200 12TH AVE S. SUITE 1200

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 2014M04L21CE0160101M

Amount of Each Disbursement this Period

199.96
--------

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

259.32
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. GREGORY A BAILOR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160102

Amount of Each Disbursement this Period

288.98

Full Name (Last, First, Middle Initial)

**B. ALBERTSONS**

Mailing Address 4800 BLUE DIAMOND ROAD

City LAS VEGAS State NV Zip Code 89139

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  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160102M

Amount of Each Disbursement this Period

52.46

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. COSTCO**

Mailing Address 801 S. PAVILLION CENTER DR.

City LAS VEGAS State NV Zip Code 89144

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  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160103M

Amount of Each Disbursement this Period

120.74

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

288.98

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. OFFICEMAX**

Mailing Address 1313 ARROYO MARKET SQUARE

City LAS VEGAS State NV Zip Code 89113

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 M	/	D D D	/	Y Y Y Y Y
03	/	24	/	2014

Transaction ID : 2014M04L21CE0160104M

Amount of Each Disbursement this Period

115.78
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. HAYDEN W STONE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	24	/	2014

Transaction ID : 2014M04L21CE0160106

Amount of Each Disbursement this Period

87.86
-------

Full Name (Last, First, Middle Initial)

**C. HAYDEN W STONE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	24	/	2014

Transaction ID : 2014M04L21CE0160107

Amount of Each Disbursement this Period

298.42
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

386.28
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JAMES GARCIA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160112

Amount of Each Disbursement this Period

201.52

Full Name (Last, First, Middle Initial)

**B. JOSHUA T KIVETT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160118

Amount of Each Disbursement this Period

151.95

Full Name (Last, First, Middle Initial)

**C. JOSHUA T KIVETT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160120

Amount of Each Disbursement this Period

3525.91

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3879.38

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HILTON HOTELS**

Mailing Address 462 LAFAYETTE ST

City State Zip Code  
BATON ROUGE LA 70801

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 2014M04L21CE0160120M

Amount of Each Disbursement this Period

359.34
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. MARRIOTT HOTELS**

Mailing Address 3131 EXECUTIVE DRIVE

City State Zip Code  
CLEARWATER FL 33762

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 2014M04L21CE0160124M

Amount of Each Disbursement this Period

668.64
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. MARRIOTT HOTELS**

Mailing Address 140 L STREET SE

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 2014M04L21CE0160130M

Amount of Each Disbursement this Period

1048.84
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[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

0.00
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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MARRIOTT HOTELS**

Mailing Address 3300 LENOX RD

City ATLANTA State GA Zip Code 30326

Purpose of Disbursement  
TRAVEL EXPENSES

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
0	3			2	4			2	0	1	4		

**Transaction ID : 2014M04L21CE0160138M**

Amount of Each Disbursement this Period

4	4	3	.	2	8
---	---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. NATIONAL CAR RENTAL**

Mailing Address 4030 GEORGE J BEAN INBOUND PARKWAY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement  
TRAVEL EXPENSES

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
0	3			2	4			2	0	1	4		

**Transaction ID : 2014M04L21CE0160145M**

Amount of Each Disbursement this Period

2	9	4	.	4	7
---	---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. JOHN R PHILLIPPE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

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
0	3			2	4			2	0	1	4		

**Transaction ID : 2014M04L21CE0160172**

Amount of Each Disbursement this Period

1	1	8	.	8	0
---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1	1	8	.	8	0
---	---	---	---	---	---

1	1	8	.	8	0
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KATIE S HRKMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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  
03 / 24 / 2014

**Transaction ID : 2014M04L21CE0160173**

Amount of Each Disbursement this Period

127.04

Full Name (Last, First, Middle Initial)

**B. TARGET**

Mailing Address 3101 JEFFERSON DAVIS HWY

City ALEXANDRIA State VA Zip Code 22305

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  
03 / 24 / 2014

**Transaction ID : 2014M04L21CE0160173M**

Amount of Each Disbursement this Period

127.04

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. KATIE S HRKMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 2014M04L21CE0160174**

Amount of Each Disbursement this Period

219.99

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

347.03

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 182 HOWARD ST #8

City State Zip Code  
SAN FRANCISCO CA 94102

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160175M

Amount of Each Disbursement this Period

208.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. MARK J JEFFERSON**

Mailing Address 310 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160181

Amount of Each Disbursement this Period

1733.73

Full Name (Last, First, Middle Initial)

**C. HOLIDAY INN**

Mailing Address 550 C STREET SW

City State Zip Code  
WASHINGTON DC 20024

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160188M

Amount of Each Disbursement this Period

1003.02

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1733.73

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL L MCCOLLUM**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 2014M04L21CE0160210**

Amount of Each Disbursement this Period

159.65

Full Name (Last, First, Middle Initial)

**B. MAGAN M MUNSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 2014M04L21CE0160213**

Amount of Each Disbursement this Period

465.48

Full Name (Last, First, Middle Initial)

**C. HERTZ**

Mailing Address 2400 YANKEE CLIPPER DRIVE

City JACKSONVILLE State FL Zip Code 32218

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 2014M04L21CE0160214M**

Amount of Each Disbursement this Period

217.65

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

625.13

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL A VALLANTE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160225

Amount of Each Disbursement this Period

146.00

Full Name (Last, First, Middle Initial)

**B. PETER F GRAVES**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160228

Amount of Each Disbursement this Period

112.00

Full Name (Last, First, Middle Initial)

**C. PETER F GRAVES**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160229

Amount of Each Disbursement this Period

1066.15

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1324.15

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FAIRFIELD INNS**

Mailing Address 2150 11TH AVENUE

City HELENA State MT Zip Code 59601

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 2014M04L21CE0160229M

Amount of Each Disbursement this Period

213.86
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. REBECCA B HEILIG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 2014M04L21CE0160257

Amount of Each Disbursement this Period

205.61
--------

Full Name (Last, First, Middle Initial)

**C. SHARON L DAY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : 2014M04L21CE0160262

Amount of Each Disbursement this Period

63.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

268.61
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SHARON L DAY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21CE0160263

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. STEPHEN W FONG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21CE0160267

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. SEAN M SPICER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L21CE0160276

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. VICTORIA J MAGUIRE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

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  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160279

Amount of Each Disbursement this Period

81.79

Full Name (Last, First, Middle Initial)

**B. CVS**

Mailing Address 162 FLEET ST

City OXON HILL State MD Zip Code 20745

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  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160279M

Amount of Each Disbursement this Period

59.58

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. PARTY CITY**

Mailing Address 5522 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22041

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  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160280M

Amount of Each Disbursement this Period

22.21

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

81.79

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. VICTORIA J MAGUIRE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 2014M04L21CE0160281

Amount of Each Disbursement this Period

6.00

Full Name (Last, First, Middle Initial)

**B. ANNETTE M BAKER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170001

Amount of Each Disbursement this Period

259.95

Full Name (Last, First, Middle Initial)

**C. ALELI PARDO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170009

Amount of Each Disbursement this Period

164.90

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

430.85

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANDREW V STEWART**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : 2014M04L21CE0170011

Amount of Each Disbursement this Period

87.86
-------

Full Name (Last, First, Middle Initial)

**B. ANDREW J VARGAS VILA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : 2014M04L21CE0170012

Amount of Each Disbursement this Period

1133.93
---------

Full Name (Last, First, Middle Initial)

**C. AVIS**

Mailing Address 4030 GEORGE J BEAN PARKWAY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : 2014M04L21CE0170013M

Amount of Each Disbursement this Period

321.76
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[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1221.79
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LA QUINTA**

Mailing Address 3301 ULMERTON ROAD

City CLEARWATER State FL Zip Code 33762

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 2014M04L21CE0170014M

Amount of Each Disbursement this Period

555.52
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. MARY C ALSFELD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 2014M04L21CE0170032

Amount of Each Disbursement this Period

86.00
-------

Full Name (Last, First, Middle Initial)

**C. BRUCE C CONNELLY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 2014M04L21CE0170033

Amount of Each Disbursement this Period

87.86
-------

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

173.86
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BRUCE C CONNELLY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
POSTAGE

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
03		31		2014

**Transaction ID : 2014M04L21CE0170034**

Amount of Each Disbursement this Period

7.23
------

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. US POSTAL SERVICE**

Mailing Address 155 N MAIN STREET

City PROSPERITY State SC Zip Code 29127

Purpose of Disbursement  
POSTAGE

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
03		31		2014

**Transaction ID : 2014M04L21CE0170034M**

Amount of Each Disbursement this Period

7.23
------

Category/  
Type

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. BRUCE C CONNELLY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

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
03		31		2014

**Transaction ID : 2014M04L21CE0170035**

Amount of Each Disbursement this Period

335.78
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Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

343.01
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170035M

Amount of Each Disbursement this Period

258.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. BRUCE C CONNELLY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170049

Amount of Each Disbursement this Period

87.36

Full Name (Last, First, Middle Initial)

**C. CHARLES J DEFEO**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170051

Amount of Each Disbursement this Period

1177.72

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1265.08

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TURN KEY VR**

Mailing Address 2525 WALLINGWOOD DRIVE, STE 801

City AUSTIN State TX Zip Code 78746

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170051M

Amount of Each Disbursement this Period

1177.72

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CARA M MASON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170054

Amount of Each Disbursement this Period

86.00

Full Name (Last, First, Middle Initial)

**C. CARA M MASON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170055

Amount of Each Disbursement this Period

157.24

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

243.24

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CAROLINE SWANN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21CE0170062**

Amount of Each Disbursement this Period

87.86

Full Name (Last, First, Middle Initial)

**B. CHRISTOPER J YOUNG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21CE0170063**

Amount of Each Disbursement this Period

84.22

Full Name (Last, First, Middle Initial)

**C. CHRISTOPER J YOUNG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21CE0170064**

Amount of Each Disbursement this Period

266.56

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

438.64

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DEAN W CLEARY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
OFFICE EQUIPMENT

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
0	3			3	1			2	0	1	4		

Transaction ID : 2014M04L21CE0170071

Amount of Each Disbursement this Period

9	.	5	1
---	---	---	---

Full Name (Last, First, Middle Initial)

**B. RADIO SHACK**

Mailing Address 717 D STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
OFFICE EQUIPMENT

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
0	3			3	1			2	0	1	4		

Transaction ID : 2014M04L21CE0170071M

Amount of Each Disbursement this Period

9	.	5	1
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. DAVID J DRUMMOND**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

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
0	3			3	1			2	0	1	4		

Transaction ID : 2014M04L21CE0170072

Amount of Each Disbursement this Period

6	4	.	8	2
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7	4	.	3	3
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DIRK E EYMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
COMPUTER EQUIPMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21CE0170073**

Amount of Each Disbursement this Period

3568.78

Full Name (Last, First, Middle Initial)

**B. APPLE**

Mailing Address 1100 SOUTH HAYES STREET

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement  
COMPUTER EQUIPMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21CE0170073M**

Amount of Each Disbursement this Period

3568.78

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. DIRK E EYMAN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21CE0170075**

Amount of Each Disbursement this Period

4.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3572.78

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MARTIN A MCKISSICK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170077

Amount of Each Disbursement this Period

46.89

Full Name (Last, First, Middle Initial)

**B. MARTIN A MCKISSICK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170078

Amount of Each Disbursement this Period

187.55

Full Name (Last, First, Middle Initial)

**C. EARL L PHILIP**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CATERING/FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170082

Amount of Each Disbursement this Period

40.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

274.44

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BUBBLE CHARLOTTE**

Mailing Address 210 TRADE STREET A200

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement  
CATERING/FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 2014M04L21CE0170082M

Amount of Each Disbursement this Period

40.00
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. EARL L PHILIP**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 2014M04L21CE0170083

Amount of Each Disbursement this Period

278.32
--------

Full Name (Last, First, Middle Initial)

**C. EARL L PHILIP**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2014

Transaction ID : 2014M04L21CE0170093

Amount of Each Disbursement this Period

467.04
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

745.36
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ELEANOR B WALLACE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170096

Amount of Each Disbursement this Period

55.64

Full Name (Last, First, Middle Initial)

**B. ELEANOR B WALLACE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170097

Amount of Each Disbursement this Period

104.34

Full Name (Last, First, Middle Initial)

**C. ISABEL M SANTA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170098

Amount of Each Disbursement this Period

85.93

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

245.91

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ISABEL M SANTA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170099

Amount of Each Disbursement this Period

622.23

Full Name (Last, First, Middle Initial)

**B. DOLLAR RENT A CAR**

Mailing Address PO BOX 33167

City TULSA State OK Zip Code 74153

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170099M

Amount of Each Disbursement this Period

264.15

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. JENNIFER L BEHR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170111

Amount of Each Disbursement this Period

84.30

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

706.53

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JENNIFER L BEHR**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

Transaction ID : 2014M04L21CE0170112

Amount of Each Disbursement this Period

1	4	7	0	8	9	.	8	5
---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. EMBASSY SUITES CHARLESTON**

Mailing Address 300 COURT STREET

City CHARLESTON State WV Zip Code 25301

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

Transaction ID : 2014M04L21CE0170114M

Amount of Each Disbursement this Period

8	9	9	.	9	6
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. JONATHAN D BLACK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

Transaction ID : 2014M04L21CE0170131

Amount of Each Disbursement this Period

1	0	3	.	7	6
---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1	5	7	4	.	6	5
---	---	---	---	---	---	---

1	5	7	4	.	6	5
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JONATHAN D BLACK**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170134

Amount of Each Disbursement this Period

1179.22

Full Name (Last, First, Middle Initial)

**B. DOUBLETREE HOTELS**

Mailing Address 3050 N. ROCKY POINT DR. WEST

City TAMPA State FL Zip Code 33607

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170134M

Amount of Each Disbursement this Period

744.46

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. NATIONAL CAR RENTAL**

Mailing Address 4030 GEORGE J BEAN INBOUND PKWY

City TAMPA State FL Zip Code 33607

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170143M

Amount of Each Disbursement this Period

235.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

1179.22

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JASON M CHUNG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170157

Amount of Each Disbursement this Period

87.86

Full Name (Last, First, Middle Initial)

**B. JAMES GARCIA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170158

Amount of Each Disbursement this Period

461.64

Full Name (Last, First, Middle Initial)

**C. ANCHORAGE MARRIOTT HOTEL**

Mailing Address 820 W 7TH AVE

City ANCHORAGE State AK Zip Code 99501

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170159M

Amount of Each Disbursement this Period

269.76

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

549.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOHANNA PERSING**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
BOOKS AND SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170177

Amount of Each Disbursement this Period

22.99

Full Name (Last, First, Middle Initial)

**B. WALL STREET JOURNAL**

Mailing Address 1211 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement  
BOOKS AND SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170177M

Amount of Each Disbursement this Period

22.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. JOHANNA PERSING**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170178

Amount of Each Disbursement this Period

104.91

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

127.90

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOSEPH N RESTA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21CE0170184**

Amount of Each Disbursement this Period

8.50

Full Name (Last, First, Middle Initial)

**B. JENNIFER L VOLDNESS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21CE0170185**

Amount of Each Disbursement this Period

42.41

Full Name (Last, First, Middle Initial)

**C. C J WHEELER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21CE0170186**

Amount of Each Disbursement this Period

85.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

135.91

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

**A. KIMBERLY MORRALL**

Full Name (Last, First, Middle Initial)

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2014

Transaction ID : 2014M04L21CE0170187

Amount of Each Disbursement this Period: 87.86

Category/Type

**B. KATHERINE M WALSH**

Full Name (Last, First, Middle Initial)

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement CATERING/FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2014

Transaction ID : 2014M04L21CE0170188

Amount of Each Disbursement this Period: 252.00

Category/Type

**C. MATCHBOX**

Full Name (Last, First, Middle Initial)

Mailing Address 521 8TH STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement CATERING/FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2014

Transaction ID : 2014M04L21CE0170188M

Amount of Each Disbursement this Period: 252.00

Category/Type

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 339.86

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LAUREN E DEVOLL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

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
03		31		2014

Transaction ID : 2014M04L21CE0170189

Amount of Each Disbursement this Period

16.46
-------

Full Name (Last, First, Middle Initial)

**B. LAUREN M HERNANDEZ**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

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
03		31		2014

Transaction ID : 2014M04L21CE0170190

Amount of Each Disbursement this Period

31.77
-------

Full Name (Last, First, Middle Initial)

**C. MICHAEL J AMBROSINI**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

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
03		31		2014

Transaction ID : 2014M04L21CE0170192

Amount of Each Disbursement this Period

12.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

60.23
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**TOTAL** This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MALLORY G HUNTER**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21CE0170193**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. MARK ISAACSON**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21CE0170194**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. PHILIP M PINNELL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L21CE0170195**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CROWNE PLAZA**

Mailing Address 2 SOMERSET PARKWAY

City NASHUA State NH Zip Code 03063

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170195M

Amount of Each Disbursement this Period

333.23

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. PHILIP M PINNELL**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170203

Amount of Each Disbursement this Period

126.56

Full Name (Last, First, Middle Initial)

**C. MICHAEL C SHORT**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170205

Amount of Each Disbursement this Period

87.86

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

214.42

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL A VALLANTE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170206

Amount of Each Disbursement this Period

119.95

Full Name (Last, First, Middle Initial)

**B. MICHAEL A VALLANTE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170208

Amount of Each Disbursement this Period

378.21

Full Name (Last, First, Middle Initial)

**C. THE CHOP HOUSE**

Mailing Address 1003 CHARLESTON TOWN CENTRE

City CHARLESTON State WV Zip Code 25389

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170211M

Amount of Each Disbursement this Period

210.22

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

498.16

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MICHAEL T WILD**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21CE0170213**

Amount of Each Disbursement this Period

215.00

Full Name (Last, First, Middle Initial)

**B. MIKE CRAPO**

Mailing Address 320 2ND ST

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21CE0170213M**

Amount of Each Disbursement this Period

215.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. OWEN M DORNEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 2014M04L21CE0170214**

Amount of Each Disbursement this Period

76.56

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

291.56

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. OWEN M DORNEY**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170215

Amount of Each Disbursement this Period

309.41

Full Name (Last, First, Middle Initial)

**B. REBECCA B HEILIG**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170221

Amount of Each Disbursement this Period

106.13

Full Name (Last, First, Middle Initial)

**C. RICHARD W WALTERS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170224

Amount of Each Disbursement this Period

86.87

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

502.41

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RICHARD W WALTERS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170225

Amount of Each Disbursement this Period

41.86

Full Name (Last, First, Middle Initial)

**B. JAMES BROWN**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170228

Amount of Each Disbursement this Period

190.35

Full Name (Last, First, Middle Initial)

**C. TIFFANY A WATKINS**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170229

Amount of Each Disbursement this Period

436.72

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

668.93

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CROWNE PLAZA**

Mailing Address 2 SOMERSET PARKWAY

City NASHUA State NH Zip Code 03063

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170229M

Amount of Each Disbursement this Period

236.26

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. VALERIE DOWLING**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170240

Amount of Each Disbursement this Period

9.95

Full Name (Last, First, Middle Initial)

**C. VALERIE DOWLING**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170241

Amount of Each Disbursement this Period

381.40

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

391.35

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. VICTORIA J MAGUIRE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

**Transaction ID : 2014M04L21CE0170255**

Amount of Each Disbursement this Period

80.28
-------

Full Name (Last, First, Middle Initial)

**B. VICTORIA J MAGUIRE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

**Transaction ID : 2014M04L21CE0170256**

Amount of Each Disbursement this Period

21.00
-------

Full Name (Last, First, Middle Initial)

**C. WILFREDO BATISTA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

**Transaction ID : 2014M04L21CE0170257**

Amount of Each Disbursement this Period

86.87
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

188.15
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WILFREDO BATISTA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170258

Amount of Each Disbursement this Period

69.13

Full Name (Last, First, Middle Initial)

**B. WILFREDO BATISTA**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRAVEL EXPENSES-MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : 2014M04L21CE0170260

Amount of Each Disbursement this Period

32.48

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
IN-KIND OFFICE EQUIPMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L21BOID00001

Amount of Each Disbursement this Period

-1262.00

OFFSET LINE 22 INKIND ARIZONA REPUBLICAN PARTY

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

-1160.39

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
IN-KIND OFFICE EQUIPMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

**Transaction ID : 2014M04L21BOID00002**

Amount of Each Disbursement this Period

-1262.00

OFFSET LINE 22 INKIND ARIZONA REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
IN-KIND OFFICE EQUIPMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2014

**Transaction ID : 2014M04L21BOID00003**

Amount of Each Disbursement this Period

-11060.19

OFFSET LINE 22 INKIND REPUBLICAN PARTY OF ARKANSAS

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
IN-KIND RENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

**Transaction ID : 2014M04L21BOID00004**

Amount of Each Disbursement this Period

-3443.93

OFFSET LINE 22 INKIND DC REPUBLICAN PARTY

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

-15766.12

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
IN-KIND OFFICE EQUIPMENT

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
IN-KIND OFFICE EQUIPMENT

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
IN-KIND OFFICE EQUIPMENT

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

Transaction ID : 2014M04L21BOID00005

Amount of Each Disbursement this Period

-2524.00

OFFSET LINE 22 INKIND REPUBLICAN PARTY OF FLORIDA

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Transaction ID : 2014M04L21BOID00006

Amount of Each Disbursement this Period

-19071.80

OFFSET LINE 22 INKIND REPUBLICAN PARTY OF LOUISIANA

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2014

Transaction ID : 2014M04L21BOID00007

Amount of Each Disbursement this Period

-981.63

OFFSET LINE 22 INKIND REPUBLICAN PARTY OF MINNESOTA

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

-22577.43

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

## A. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
IN-KIND OFFICE EQUIPMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

Transaction ID : 2014M04L21BOID00008

Amount of Each Disbursement this Period

-4804.76
----------

OFFSET LINE 22 INKIND NORTH CAROLINA  
REPUBLICAN

Full Name (Last, First, Middle Initial)

## B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

## C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

-4804.76
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6869007.59
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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 checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ARIZONA REPUBLICAN PARTY**

Mailing Address 3501 N 24TH ST

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement  
In-kind Office Equipment

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

**Transaction ID : 2014M04L22TR00001**

Amount of Each Disbursement this Period

1262.00

SEE LINE 21-SCHEDULE B OFFSET IN-KIND TRANSFER EQUIPMENT

Full Name (Last, First, Middle Initial)

**B. ARIZONA REPUBLICAN PARTY**

Mailing Address 3501 N 24TH ST

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement  
In-kind Office Equipment

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2014

**Transaction ID : 2014M04L22TR00002**

Amount of Each Disbursement this Period

1262.00

SEE LINE 21-SCHEDULE B OFFSET IN-KIND TRANSFER EQUIPMENT

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN PARTY OF ARKANSAS**

Mailing Address 1201 WEST 6TH ST

City LITTLE ROCK State AR Zip Code 72201

Purpose of Disbursement  
In-kind Office Equipment

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2014

**Transaction ID : 2014M04L22TR00003**

Amount of Each Disbursement this Period

11060.19

SEE LINE 21-SCHEDULE B OFFSET IN-KIND TRANSFER EQUIPMENT

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

13584.19

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DC REPUBLICAN PARTY FEDERAL ACCOUNT**

Mailing Address P.O. BOX 75153

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement  
In-kind Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

**Transaction ID : 2014M04L22TR00004**

Amount of Each Disbursement this Period

3443.93

SEE LINE 21-SCHEDULE B OFFSET IN-KIND OFFICE SPACE

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN PARTY OF FLORIDA**

Mailing Address 420 E. JEFFERSON STREET  
PO BOX 311

City TALLAHASSEE State FL Zip Code 32301

Purpose of Disbursement  
In-kind Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

**Transaction ID : 2014M04L22TR00005**

Amount of Each Disbursement this Period

2524.00

SEE LINE 21-SCHEDULE B OFFSET IN-KIND TRANSFER EQUIPMENT

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN PARTY OF LOUISIANA**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
In-kind Office Equipment

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

**Transaction ID : 2014M04L22TR00006**

Amount of Each Disbursement this Period

19071.80

SEE LINE 21-SCHEDULE B OFFSET IN-KIND TRANSFER EQUIPMENT

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

25039.73

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN PARTY OF MINNESOTA**

Mailing Address 525 PARK STREET  
SUITE 250

City ST PAUL State MN Zip Code 55103

Purpose of Disbursement  
In-kind Office Equipment

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
03 / 12 / 2014

**Transaction ID : 2014M04L22TR00007**

Amount of Each Disbursement this Period

981.63

SEE LINE 21-SCHEDULE B OFFSET IN-KIND  
TRANSFER EQUIPMENT

Full Name (Last, First, Middle Initial)

**B. NORTH CAROLINA REPUBLICAN PARTY**

Mailing Address 1506 HILLSBOROUGH ST

City RALEIGH State NC Zip Code 27605

Purpose of Disbursement  
In-kind Office Equipment

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
03 / 21 / 2014

**Transaction ID : 2014M04L22TR00008**

Amount of Each Disbursement this Period

4804.76

SEE LINE 21-SCHEDULE B OFFSET IN-KIND  
TRANSFER EQUIPMENT

Full Name (Last, First, Middle Initial)

**C. KANSAS REPUBLICAN PARTY**

Mailing Address PO BOX 4157

City TOPEKA State KS Zip Code 66604

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
03 / 04 / 2014

**Transaction ID : 2014M04L22TR00009**

Amount of Each Disbursement this Period

300.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

6086.39

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN PARTY OF MINNESOTA**

Mailing Address 525 PARK STREET  
SUITE 250

City ST PAUL State MN Zip Code 55103

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
03 / 04 / 2014

Transaction ID : 2014M04L22TR00010

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**B. NEW JERSEY REPUBLICAN STATE COMMITTEE**

Mailing Address 150 W STATE ST, SUITE 230

City TRENTON State NJ Zip Code 08608

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
03 / 04 / 2014

Transaction ID : 2014M04L22TR00011

Amount of Each Disbursement this Period

3750.00

Full Name (Last, First, Middle Initial)

**C. TENNESSEE REPUBLICAN PARTY**

Mailing Address FEDERAL ELECTION ACCOUNT  
2424 21ST AVE, SUITE 200

City NASHVILLE State TN Zip Code 37212

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
03 / 04 / 2014

Transaction ID : 2014M04L22TR00012

Amount of Each Disbursement this Period

3750.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

10500.00

**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 checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN PARTY OF NEBRASKA**

Mailing Address 1610 N ST

City LINCORN State NE Zip Code 68508

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2014

Transaction ID : 2014M04L22TR00013

Amount of Each Disbursement this Period

3750.00

Category/Type

Full Name (Last, First, Middle Initial)

**B. ALABAMA REPUBLICAN PARTY**

Mailing Address PO BOX 55628

City BIRMINGHAM State AL Zip Code 35255

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2014

Transaction ID : 2014M04L22TR00014

Amount of Each Disbursement this Period

3750.00

Category/Type

Full Name (Last, First, Middle Initial)

**C. ARIZONA REPUBLICAN PARTY**

Mailing Address 3501 N 24TH ST

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : 2014M04L22TR00015

Amount of Each Disbursement this Period

3400.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

10900.00

**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 checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MONTANA REPUBLICAN STATE CENTRAL COMMITTEE**

Mailing Address P.O. BOX 935

City HELENA State MT Zip Code 59624

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 19 / 2014

**Transaction ID : 2014M04L22TR00016**

Amount of Each Disbursement this Period

1700.00

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN PARTY OF OHIO**

Mailing Address 211 S. 5TH STREET

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 25 / 2014

**Transaction ID : 2014M04L22TR00017**

Amount of Each Disbursement this Period

150000.00

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN FEDERAL COMMITTEE OF PENNSYLVANIA**

Mailing Address 112 STATE STREET

City HARRISBURG State PA Zip Code 17101

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

**Transaction ID : 2014M04L22TR00018**

Amount of Each Disbursement this Period

52900.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

204600.00

**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 checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN PARTY OF TEXAS**

Mailing Address 1108 LAVACA ST  
SUITE 500

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

Transaction ID : 2014M04L22TR00019

Amount of Each Disbursement this Period

55600.00

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN PARTY OF FLORIDA**

Mailing Address 420 E. JEFFERSON STREET  
PO BOX 311

City TALLAHASSEE State FL Zip Code 32301

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

Transaction ID : 2014M04L22TR00020

Amount of Each Disbursement this Period

66240.00

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN PARTY OF OHIO**

Mailing Address 211 S. 5TH STREET

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

Transaction ID : 2014M04L22TR00021

Amount of Each Disbursement this Period

59550.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

181390.00

**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 checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MARYLAND REPUBLICAN STATE CENTRAL COMMITTEE**

Mailing Address 95 CATHEDRAL STREET

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement  
TRANSFER

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
0	3			1	2			2	0	1	4		

Transaction ID : 2014M04L22TR00022

Amount of Each Disbursement this Period

1	8	7	5	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN FEDERAL COMMITTEE OF PENNSYLVANIA**

Mailing Address 112 STATE STREET

City HARRISBURG State PA Zip Code 17101

Purpose of Disbursement  
TRANSFER

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
0	3			1	9			2	0	1	4		

Transaction ID : 2014M04L22TR00023

Amount of Each Disbursement this Period

1	7	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN PARTY OF WISCONSIN**

Mailing Address 148 E JOHNSON STREET

City MADISON State WI Zip Code 53703

Purpose of Disbursement  
TRANSFER

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
0	3			0	4			2	0	1	4		

Transaction ID : 2014M04L22TR00024

Amount of Each Disbursement this Period

4	2	0	5	0	.	0	0
---	---	---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

4	5	6	2	5	.	0	0
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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 checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MAINE REPUBLICAN PARTY**

Mailing Address 9 HIGGINS ST

City AUGUSTA State ME Zip Code 04330

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

**Transaction ID : 2014M04L22TR00025**

Amount of Each Disbursement this Period

5300.00

Full Name (Last, First, Middle Initial)

**B. NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE**

Mailing Address 10 WATER ST

City CONCORD State NH Zip Code 03301

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

**Transaction ID : 2014M04L22TR00026**

Amount of Each Disbursement this Period

13600.00

Full Name (Last, First, Middle Initial)

**C. COLORADO REPUBLICAN COMMITTEE**

Mailing Address 5950 S. WILLOW DRIVE  
SUITE 302

City GREENWOOD VILLAGE State CO Zip Code 80111

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

**Transaction ID : 2014M04L22TR00027**

Amount of Each Disbursement this Period

18800.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

37700.00

**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 checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN PARTY OF ARKANSAS**

Mailing Address 1201 WEST 6TH ST

City LITTLE ROCK State AR Zip Code 72201

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

Transaction ID : 2014M04L22TR00028

Amount of Each Disbursement this Period

41350.00

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN PARTY OF LOUISIANA**

Mailing Address 530 LAKELAND DRIVE  
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

Transaction ID : 2014M04L22TR00029

Amount of Each Disbursement this Period

48300.00

Full Name (Last, First, Middle Initial)

**C. GEORGIA REPUBLICAN PARTY**

Mailing Address PO BOX 550008

City ATLANTA State GA Zip Code 30355

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2014

Transaction ID : 2014M04L22TR00030

Amount of Each Disbursement this Period

18450.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

108100.00

**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 checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MONTANA REPUBLICAN STATE CENTRAL COMMITTEE**

Mailing Address P.O. BOX 935

City HELENA State MT Zip Code 59624

Purpose of Disbursement  
TRANSFER

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
0	3		0	4		2	0	1	4

**Transaction ID : 2014M04L22TR00031**

Amount of Each Disbursement this Period

1	9	4	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. WEST VIRGINIA REPUBLICAN PARTY**

Mailing Address 700 WASHINGTON ST E SUITE 201

City CHARLESTON State WV Zip Code 25301

Purpose of Disbursement  
TRANSFER

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
0	3		0	5		2	0	1	4

**Transaction ID : 2014M04L22TR00032**

Amount of Each Disbursement this Period

2	5	4	0	0	0	0
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Full Name (Last, First, Middle Initial)

**C. CALIFORNIA REPUBLICAN PARTY**

Mailing Address 1903 W. MAGNOLIA BLVD

City BURBANK State CA Zip Code 91506

Purpose of Disbursement  
TRANSFER

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
0	3		0	4		2	0	1	4

**Transaction ID : 2014M04L22TR00033**

Amount of Each Disbursement this Period

3	0	6	0	0	0	0
---	---	---	---	---	---	---

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7	5	4	0	0	0	0
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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 checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UTAH REPUBLICAN PARTY**

Mailing Address 117 EAST SOUTH TEMPLE

City State Zip Code  
SALT LAKE CITY UT 84111

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
03 / 04 / 2014

**Transaction ID : 2014M04L22TR00037**

Amount of Each Disbursement this Period

6950.00

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN PARTY OF IOWA**

Mailing Address 621 EAST 9TH STREET

City State Zip Code  
DES MOINES IA 50309

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
03 / 04 / 2014

**Transaction ID : 2014M04L22TR00038**

Amount of Each Disbursement this Period

6950.00

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN PARTY OF ILLINOIS**

Mailing Address PO BOX 78

City State Zip Code  
SPRINGFIELD IL 62705

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
03 / 04 / 2014

**Transaction ID : 2014M04L22TR00039**

Amount of Each Disbursement this Period

6950.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

20850.00

**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 checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SOUTH CAROLINA REPUBLICAN PARTY**

Mailing Address PO BOX 12373

City COLUMBIA State SC Zip Code 29211

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2014

Transaction ID : 2014M04L22TR00040

Amount of Each Disbursement this Period

7900.00

Full Name (Last, First, Middle Initial)

**B. NEW YORK REPUBLICAN FEDERAL CAMPAIGN COMMITTEE**

Mailing Address 315 STATE STREET

City ALBANY State NY Zip Code 12210

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2014

Transaction ID : 2014M04L22TR00041

Amount of Each Disbursement this Period

17250.00

Full Name (Last, First, Middle Initial)

**C. HAWAII REPUBLICAN PARTY**

Mailing Address 725 KAPIOLANI BLVD  
#C-105

City HONOLULU State HI Zip Code 96813

Purpose of Disbursement  
TRANSFER

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2014

Transaction ID : 2014M04L22TR00042

Amount of Each Disbursement this Period

3750.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

28900.00

**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 checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RHODE ISLAND REPUBLICAN PARTY STATE CENTRAL COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2014

Mailing Address 1800 POST ROAD, SUITE 17-1

**Transaction ID : 2014M04L22TR00043**

City WARWICK State RI Zip Code 02886

Amount of Each Disbursement this Period

3950.00
---------

Purpose of Disbursement  
TRANSFER

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. MAINE REPUBLICAN PARTY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2014

Mailing Address 9 HIGGINS ST

**Transaction ID : 2014M04L22TR00044**

City AUGUSTA State ME Zip Code 04330

Amount of Each Disbursement this Period

3950.00
---------

Purpose of Disbursement  
TRANSFER

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. MASSACHUSETTS REPUBLICAN PARTY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2014

Mailing Address 85 MERRIMAC STREET SUITE 400

**Transaction ID : 2014M04L22TR00045**

City BOSTON State MA Zip Code 02114

Amount of Each Disbursement this Period

3950.00
---------

Purpose of Disbursement  
TRANSFER

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

11850.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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 checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CONNECTICUT REPUBLICAN SCC**

Mailing Address 31 PRATT STREET  
4TH FLOOR

City HARTFORD State CT Zip Code 06103

Purpose of Disbursement  
TRANSFER

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  
03 / 04 / 2014

Transaction ID : 2014M04L22TR00046

Amount of Each Disbursement this Period

3950.00

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN PARTY OF VIRGINIA**

Mailing Address RICHARD D. OBENSHAIN CENTER  
115 EAST GRACE STREET

City RICHMOND State VA Zip Code 23219

Purpose of Disbursement  
TRANSFER

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  
03 / 04 / 2014

Transaction ID : 2014M04L22TR00047

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

7950.00

868925.31

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOHN F ALLEN**

Mailing Address 979 N BOLTON AVE

City INDIANAPOLIS State IN Zip Code 46219

Purpose of Disbursement  
REFUND

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
03	/	18	/	2014

**Transaction ID : 2014M04L28ARI00001**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. FRED EDWARDS**

Mailing Address 2295 SPRINGWOOD DR

City AUBURN State AL Zip Code 36830

Purpose of Disbursement  
REFUND

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
03	/	14	/	2014

**Transaction ID : 2014M04L28ARI00002**

Amount of Each Disbursement this Period

120.00
--------

Full Name (Last, First, Middle Initial)

**C. TAMMY ERICKSON**

Mailing Address 23800 NE JEHNSEN RD

City YACOLT State WA Zip Code 98675

Purpose of Disbursement  
REFUND

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
03	/	06	/	2014

**Transaction ID : 2014M04L28ARI00003**

Amount of Each Disbursement this Period

40.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

660.00
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**TOTAL** This Period (last page this line number only)..... ▶

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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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ROBERT HASLER**

Mailing Address 9314 FAIRCHILD LN

City CHARLOTTE State NC Zip Code 28277

Purpose of Disbursement  
REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L28ARI00004**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. JEANNE HUMES**

Mailing Address 3827 GREENSBURG PIKE

City PITTSBURGH State PA Zip Code 15221

Purpose of Disbursement  
REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L28ARI00005**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. KENNETH JUE**

Mailing Address 1362 W SAN JOSE AVE

City FRESNO State CA Zip Code 93711

Purpose of Disbursement  
REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L28ARI00006**

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. EVELYN MANGOLD**

Mailing Address 1212 DAME SUSAN LN

City State Zip Code  
LEWISVILLE TX 20003

Purpose of Disbursement  
REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L28ARI00007

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. JUNE ANN MASON**

Mailing Address 108 NORTHUMBERLAND RD

City State Zip Code  
PITTSFIELD MA 01201

Purpose of Disbursement  
REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L28ARI00008

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. ELIZABETH JEAN MESSERLIE**

Mailing Address 1790 E 54TH ST  
#203

City State Zip Code  
INDIANAPOLIS IN 46220

Purpose of Disbursement  
REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : 2014M04L28ARI00009

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MARIAN L WILLIAMS**

Mailing Address 389-A KAELEPULU DR

City KAILUA State HI Zip Code 96734

Purpose of Disbursement  
REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	20	/	2014

Transaction ID : 2014M04L28ARI00010

Amount of Each Disbursement this Period

150.00
--------

Full Name (Last, First, Middle Initial)

**B. NEWCASTLE VENTURES, LLC**

Mailing Address 7367 SARIMENTO PL

City DELRAY BEACH State FL Zip Code 33446

Purpose of Disbursement  
REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	14	/	2014

Transaction ID : 2014M04L28ARI00011

Amount of Each Disbursement this Period

50000.00
----------

Full Name (Last, First, Middle Initial)

**C. RUBEN RODRIGUEZ**

Mailing Address 93 OAK LN

City NORTHAMPTON State PA Zip Code 18067

Purpose of Disbursement  
REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2014

Transaction ID : 2014M04L28ARI00012

Amount of Each Disbursement this Period

35.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

50185.00
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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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. EDMUND O SCHWEITZER**

Mailing Address 330 NW BRANDON DRIVE

City PULLMAN State WA Zip Code 99163

Purpose of Disbursement  
REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L28ARI00013**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. BEATRIZ SCWEITZER**

Mailing Address 330 NW BRANDON DRIVE

City PULLMAN State WA Zip Code 99163

Purpose of Disbursement  
REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 2014M04L28ARI00014**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BELL MCANDREWS & HILTACHK LLP**

Mailing Address 455 CAPITOL MALL SUITE 600

City State Zip Code  
SACRAMENTO CA 95814

Purpose of Disbursement  
RECOUNT LEGAL AND COMPLIANCE SERVICES

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  
03 / 26 / 2014

Transaction ID : 2014M04L29OD00001

Amount of Each Disbursement this Period

9776.70

Full Name (Last, First, Middle Initial)

**B. ELAVON**

Mailing Address ONE CONCOURSE PKY  
SUITE 300

City State Zip Code  
ATLANTA GA 30328

Purpose of Disbursement  
RECOUNT REVENUE PROCESSING SERVICES

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  
03 / 03 / 2014

Transaction ID : 2014M04L29OD00002

Amount of Each Disbursement this Period

84.71

Full Name (Last, First, Middle Initial)

**C. GEOGRAPHIC STRATEGIES,LLP**

Mailing Address 7119 MARINE DRIVE

City State Zip Code  
ALEXANDRIA VA 22307

Purpose of Disbursement  
RECOUNT LEGAL AND COMPLIANCE SERVICES

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  
03 / 05 / 2014

Transaction ID : 2014M04L29OD00003

Amount of Each Disbursement this Period

32914.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

42775.41

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. GEOGRAPHIC STRATEGIES,LLP**

Mailing Address 7119 MARINE DRIVE

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement  
RECOUNT LEGAL AND COMPLIANCE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : 2014M04L29OD00004

Amount of Each Disbursement this Period

32914.00

**B. HOLTZMAN VOGEL PLLC**

Mailing Address 45 NORTH HILL DRIVE  
SUITE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
RECOUNT LEGAL AND COMPLIANCE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : 2014M04L29OD00005

Amount of Each Disbursement this Period

3150.00

**C. HOLTZMAN VOGEL PLLC**

Mailing Address 45 NORTH HILL DRIVE  
SUITE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
RECOUNT LEGAL AND COMPLIANCE SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : 2014M04L29OD00006

Amount of Each Disbursement this Period

11321.51

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

47385.51

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MCDERMOTT WILL & EMERY LLP**

Mailing Address P O BOX 6043

City State Zip Code  
CHICAGO IL 60680

Purpose of Disbursement  
RECOUNT LEGAL AND COMPLIANCE SERVICES

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  
03 / 26 / 2014

Transaction ID : 2014M04L29OD00007

Amount of Each Disbursement this Period

1238.60

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. MICHAEL T MORLEY**

Mailing Address 175 BEACON STREET  
#105

City State Zip Code  
SOMERVILLE MA 02143

Purpose of Disbursement  
RECOUNT PRINTING/GRAPHIC SERVICES

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  
03 / 12 / 2014

Transaction ID : 2014M04L29OD00008

Amount of Each Disbursement this Period

1331.58

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. BECKER GALLAGHER**

Mailing Address 8790 GOVERNER'S HILL DRIVE  
SUITE 102

City State Zip Code  
CINCINNATI OH 45249

Purpose of Disbursement  
RECOUNT PRINTING/GRAPHIC SERVICES

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  
03 / 12 / 2014

Transaction ID : 2014M04L29OD00008M

Amount of Each Disbursement this Period

1331.58

Category/  
Type

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2570.18

# 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

## A. REPUBLICAN NATIONAL COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Mailing Address OPERATING ACCOUNT  
310 1ST ST SE

Transaction ID : 2014M04L29OD00009

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

29930.07
----------

Purpose of Disbursement  
RECOUNT LEGAL AND COMPLIANCE SERVICES

Category/ Type
-------------------

Candidate Name

[MEMO ITEM]

TRANSFER OF EXPENSES REIMBURSEMENT FOR  
ALLOCATED STAFF SALARIES AND BENEFITS PER  
AO 2010-14

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Full Name (Last, First, Middle Initial)

## B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Full Name (Last, First, Middle Initial)

## C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00
------

TOTAL This Period (last page this line number only)..... ▶

92731.10
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**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 2949 OF 2949
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**REPUBLICAN NATIONAL COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>MARA 2013</b>	Nature of Debt (Purpose): DATA SERVICES
Mailing Address 3221 11TH STREET NW	
City State Zip Code WASHINGTON DC 20010	

Outstanding Balance Beginning This Period 1225.20	<b>Transaction ID : 2014M04SD00001</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1225.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1225.20
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	1225.20
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	1225.20