

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
NEW REPUBLICAN PAC

ADDRESS (number and street) **204 S. MONROE ST.STE 201-A**
Check if different than previously reported. (ACC) **TALLAHASSEE FL 32301**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00544544 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
DOZIER, JULIE, , ,
Type or Print Name of Treasurer

Signature of Treasurer DOZIER, JULIE, , , [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

NEW REPUBLICAN PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		899966.98
(b) Cash on Hand at Beginning of Reporting Period.....	4286760.75	
(c) Total Receipts (from Line 19)	7007540.00	16695037.58
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	11294300.75	17595004.56
7. Total Disbursements (from Line 31).....	7223871.42	13524575.23
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	4070429.33	4070429.33
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	191752.42	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

NEW REPUBLICAN PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 08 / 09 / 2018 To: M M / D D / Y Y Y Y 09 / 30 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6679800.00	16263949.33
(ii) Unitemized	240.00	50088.25
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6680040.00	16314037.58
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	52500.00	53500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	6732540.00	16367537.58
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	275000.00	327500.00
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)).....▶	7007540.00	16695037.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	7007540.00	16695037.58

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	3086641.66	4064805.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3086641.66	4064805.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	4087229.76	9409769.86
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	50000.00	50000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	50000.00	50000.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7223871.42	13524575.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7223871.42	13524575.23

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6732540.00	16367537.58
34. Total Contribution Refunds (from Line 28(d))	50000.00	50000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6682540.00	16317537.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3086641.66	4064805.37
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3086641.66	4064805.37

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 76
<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)
NEW REPUBLICAN PAC

A. CONSTANCE, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 439 MEADOWBROOK DRIVE
 City SANTA BARBARA State CA Zip Code 93108-2681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 10 / 2018
Transaction ID : SA11A.2435
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BUSCH, AUGUST, , , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3561 SHORE LANE
 City BOCA GRANDE State FL Zip Code 33921-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265000.00

Date of Receipt 08 / 14 / 2018
Transaction ID : SA11A.2436
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. GILLIAM, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 820
 City KESWICK State VA Zip Code 22947-0820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CUMBERLAND DEVELOPMENT Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 14 / 2018
Transaction ID : SA11A.2437
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. HUIZENGA, H, WAYNE, , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7900 GLADES RD, STE 402

City BOCA RATON	State FL	Zip Code 33434-4105
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) HUIZENGA HOLDINGS, INC		Occupation (for Individual) PRESIDENT/CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2018

Transaction ID : SA11A.2438

Amount of Each Receipt this Period

50000.00

 Memo Item
CONTRIBUTION

B. LINDER, CARL, H., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 E 4TH ST, 40S

City CINCINNATI	State OH	Zip Code 45202-4242
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2018

Transaction ID : SA11A.2439

Amount of Each Receipt this Period

3000.00

 Memo Item
CONTRIBUTION

C. HILL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 N. 3RD AVE

City HAILEY	State ID	Zip Code 83333-8459
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) JOLYNNE DEVELOPMENT, INC		Occupation (for Individual) PRESIDENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2018

Transaction ID : SA11A.2440

Amount of Each Receipt this Period

25.00

 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	53025.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. WENDT, GARY, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3055 HARBOR DRIVE STE 1701
 City FT LAUDERDALE State FL Zip Code 33316-2459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 21 / 2018
Transaction ID : SA11A.2442
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

B. KELLETT, SAMUEL, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12166 NORTH STATE ROAD 53
 City MADISON State FL Zip Code 32340-3317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SBK CAPITAL, LLC Occupation (for Individual) CHAIRMAN/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 22 / 2018
Transaction ID : SA11A.2444
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

C. KELLETT, STILES, A., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 GALLERIA PARKWAY SUITE 1800
 City ATLANTA State GA Zip Code 30339-5946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KELLETT INVESTMENT CORPORATION Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 22 / 2018
Transaction ID : SA11A.2445
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. NAEGELE, ROBERT, O., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2355 RUE DU JARDIN PH9
 City NAPLES State FL Zip Code 34105-3268
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTMENTS
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 22 / 2018
Transaction ID : SA11A.2446
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

B. EZRATTI, ITZHAK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12717 WEST SUNRISE BOULEVARD 415
 City FORT LAUDERDALE State FL Zip Code 33323-0902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GL HOMES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 08 / 23 / 2018
Transaction ID : SA11A.2448
 Amount of Each Receipt this Period 20000.00
 Memo Item CONTRIBUTION

C. EZRATTI, MAXIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12717 WEST SUNRISE BOULEVARD 415
 City FORT LAUDERDALE State FL Zip Code 33323-0902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GL HOMES Occupation (for Individual) PLANNING DEPT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4600.00

Date of Receipt 08 / 23 / 2018
Transaction ID : SA11A.2447
 Amount of Each Receipt this Period 4600.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	29600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. EZRATTI, MAYA , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12717 WEST SUNRISE BOULEVARD
 415
 City FORT LAUDERDALE State FL Zip Code 33323-0902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GL HOMES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt 08 / 23 / 2018
Transaction ID : SA11A.2449
 Amount of Each Receipt this Period 4600.00
 Memo Item CONTRIBUTION

B. EZRATTI, MISHA , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12717 WEST SUNRISE BOULEVARD
 415
 City SUNRISE State FL Zip Code 33323-0902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GL HOMES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt 08 / 24 / 2018
Transaction ID : SA11A.2451
 Amount of Each Receipt this Period 4600.00
 Memo Item CONTRIBUTION

C. COTO, JULIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 AVILA CT
 City CASSELBERRY State FL Zip Code 32708-3917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EXCEL ENGINEERING Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 26 / 2018
Transaction ID : SA11A.2452
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 9250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. LAUTENBACH, NED, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1801 GALLEON DRIVE
 City NAPLES State FL Zip Code 34102-7761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 08 / 27 / 2018
Transaction ID : SA11A.2454
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

B. SCRIVNER, DOUGLAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25461 W. FREMONT ROAD
 City LOS ANGELES State CA Zip Code 94022-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 08 / 27 / 2018
Transaction ID : SA11A.2453
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

C. PILOT CORPORATION
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5508 LONAS DRIVE
 City KNOXVILLE State TN Zip Code 37909-3221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 08 / 28 / 2018
Transaction ID : SA11A.2455
 Amount of Each Receipt this Period 250000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 275000.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. CRAFT, JOSEPH, , , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1717 S BOULDER AVE STE 400

City TULSA	State OK	Zip Code 74119-4833
---------------	-------------	------------------------

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

Name of Employer (for Individual) ALLIANCE RESOURCE PARTNERS	Occupation (for Individual) PRESIDENT, CEO, & DIRECTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2018

Transaction ID : SA11A.2458

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

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

Mailing Address 1424 NIGHTHAWK PT

City NAPLES	State FL	Zip Code 34105-2789
----------------	-------------	------------------------

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

Name of Employer (for Individual) ROSSER CAPITAL PARTNERS	Occupation (for Individual) INVESTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2018

Transaction ID : SA11A.2459

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. BANKERS INSURANCE COMPANY
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 15707

City ST. PETERSBURG	State FL	Zip Code 33733-5707
------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2018

Transaction ID : SA11A.2456

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 76
	<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)
NEW REPUBLICAN PAC

A. PROBITY INTERNATIONAL CORP
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421 NORTH BEVERLY DRIVE
 SUITE 350
 City BEVERLY HILLS State CA Zip Code 90210-4640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 08 / 29 / 2018
Transaction ID : SA11A.2460
 Amount of Each Receipt this Period
 10000.00
 Memo Item
CONTRIBUTION

B. SUMMIT CARE II, INC.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2123 CENTRE POINTE BLVD
 City TALLAHASSEE State FL Zip Code 32308-4930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 08 / 29 / 2018
Transaction ID : SA11A.2457
 Amount of Each Receipt this Period
 5000.00
 Memo Item
CONTRIBUTION

C. DIERMEIER, JEFFREY , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2113 CANNA WAY
 City NAPLES State FL Zip Code 34105-3069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 20000.00

Date of Receipt
 08 / 30 / 2018
Transaction ID : SA11A.2462
 Amount of Each Receipt this Period
 20000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	35000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 14 OF 76
(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)
NEW REPUBLICAN PAC

A. GOODWIN, WILLIAM, H., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 E. CANAL ST
 SUITE 1900
 City RICHMOND State VA Zip Code 23219-3955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 30 / 2018
Transaction ID : SA11A.2461
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. RAI SERVICES COMPANY
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 464
 City WINSTON SALEM State NC Zip Code 27102-0464
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 08 / 30 / 2018
Transaction ID : SA11A.2463
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. ALVAREZ, CESAR, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 SE 2 AVENUE
 44 FLOOR
 City MIAMI State FL Zip Code 33131-2176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GREENBERG TRAURIG Occupation (for Individual) SENIOR CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 08 / 31 / 2018
Transaction ID : SA11A.2465
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 52000.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 OF 76
	(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)
NEW REPUBLICAN PAC

A. FLORY, DAVID , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 SOUTH POINTE DRIVE
 2008
 City MIAMI BEACH State FL Zip Code 33139-4767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 08 / 31 / 2018
Transaction ID : SA11A.2466
 Amount of Each Receipt this Period
 10000.00
 Memo Item
 CONTRIBUTION

B. KENNEDY, LESA , , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 S ORLANDO AVENUE
 370
 City WINTER PARK State FL Zip Code 32789-7109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ISC Occupation (for Individual) CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 25000.00

Date of Receipt
 08 / 31 / 2018
Transaction ID : SA11A.2467
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

C. DAB CONSTRUCTORS INC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1589
 City INGLIS State FL Zip Code 34449-1589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 50000.00

Date of Receipt
 08 / 31 / 2018
Transaction ID : SA11A.2464
 Amount of Each Receipt this Period
 50000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	85000.00
TOTAL This Period (last page this line number 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 76
	(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)
NEW REPUBLICAN PAC

A. KUESTER, DENNIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 SEAGATE DRIVE 3S
 City NAPLES State FL Zip Code 34103-2419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 04 / 2018
Transaction ID : SA11A.2468
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. BINDLEY, WILLIAM, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4301 CUTLASS LANE
 City NAPLES State FL Zip Code 34102-7943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BINDLEY CAPITAL PARTNERS Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 09 / 05 / 2018
Transaction ID : SA11A.2478
 Amount of Each Receipt this Period 20000.00
 Memo Item CONTRIBUTION

C. CHILDS, JOHN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 WINTER STREET SUITE 4300
 City WALTHAM State MA Zip Code 02451-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J.W. CHILDS ASSOCIATES Occupation (for Individual) CHAIRMAN & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 09 / 05 / 2018
Transaction ID : SA11A.2479
 Amount of Each Receipt this Period 250000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	280000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KIRTLEY, JOHN, , ,			Date of Receipt
Mailing Address 511 W. BAY STREET STE 363			<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2018"/>
City TAMPA	State FL	Zip Code 33606-2737	Transaction ID : SA11A.2475
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10000.00"/>
Name of Employer (for Individual) KLH CAPITAL		Occupation (for Individual) FINANCE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ROBERTS, DUANE, R., ,			Date of Receipt
Mailing Address 4100 NEWPORT PLACE SUITE 400			<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2018"/>
City NEWPORT BEACH	State CA	Zip Code 92660-2450	Transaction ID : SA11A.2477
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10000.00"/>
Name of Employer (for Individual) ENTREPRENEURIAL CORPORATE GROUP		Occupation (for Individual) OWNER, CEO & CHAIRMAN	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SCHAR, DWIGHT, C., ,			Date of Receipt
Mailing Address 505 S. FLAGLER DRIVE SUITE 900			<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2018"/>
City WEST PALM BEACH	State FL	Zip Code 33401-5948	Transaction ID : SA11A.2471
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="50000.00"/>
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="50000.00"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="70000.00"/>
TOTAL 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 18 OF 76
(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)
NEW REPUBLICAN PAC

A. AIRAMID HEALTH SERVICES LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1665 PALM BEACH LAKES BLVD #700
 City WEST PALM BEACH State FL Zip Code 33401-2118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 09 / 05 / 2018
Transaction ID : SA11A.2473
 Amount of Each Receipt this Period
 1000.00
 Memo Item
CONTRIBUTION

B. HERZOG CONTRACTING CORPORATION
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1089
 City ST JOSEPH State MO Zip Code 64502-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 50000.00

Date of Receipt
 09 / 05 / 2018
Transaction ID : SA11A.2474
 Amount of Each Receipt this Period
 50000.00
 Memo Item
CONTRIBUTION

C. HOLLAND GOVERNMENT AFFAIRS LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 MAIN STREET
 SUITE 700
 City VANCOUVER State WA Zip Code 98660-2970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 2700.00

Date of Receipt
 09 / 05 / 2018
Transaction ID : SA11A.2470
 Amount of Each Receipt this Period
 2700.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 53700.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 76
	(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)
NEW REPUBLICAN PAC

A. PALM HEALTHCARE MANAGEMENT

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

Mailing Address 2033 MAIN STREET
SUITE 300

City SARASOTA State FL Zip Code 34237-6062

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2018

Transaction ID : SA11A.2472

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. HARROD, GARY, W., ,

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

Mailing Address 5550 W EXECUTIVE DRIVE
SUITE 550

City TAMPA State FL Zip Code 33609-1009

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

Name of Employer (for Individual) Occupation (for Individual)
HARROD PROPERTIES, INC. CEO

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
 09 / 06 / 2018

Transaction ID : SA11A.2480

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. DAVIS, JAMES, , ,

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

Mailing Address 100 GUEST ST

City BOSTON State MA Zip Code 02135-2028

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

Name of Employer (for Individual) Occupation (for Individual)
NEW BALANCE ATHLETIC SHOE EXECUTIVE

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
 09 / 07 / 2018

Transaction ID : SA11A.2481

Amount of Each Receipt this Period
20000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 76
	(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)
NEW REPUBLICAN PAC

A. RUST, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1430 S DIXIE HWY
 STE 315
 City CORAL GABLES State FL Zip Code 33146-3174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 52000.00

Date of Receipt 09 / 07 / 2018
Transaction ID : SA11A.2482
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. BARNETT, CAROL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5815 LIVE OAK RD
 City LAKELAND State FL Zip Code 33813-3082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PUBLIX SUPER MARKETS, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 09 / 12 / 2018
Transaction ID : SA11A.2486
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

C. BARNETT, HOYT, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5815 LIVE OAK RD
 City LAKELAND State FL Zip Code 33813-3082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PUBLIX SUPER MARKETS, INC. Occupation (for Individual) VICE CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 09 / 12 / 2018
Transaction ID : SA11A.2487
 Amount of Each Receipt this Period 35000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. CANIZARO, JOE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 909 POYDRAS ST, SUITE 1700
 City NEW ORLEANS State LA Zip Code 70112-4010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CORPORATE CAPITAL LLC/FIRST TRUST CORP Occupation (for Individual) CHAIRMAN & CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 12 / 2018
Transaction ID : SA11A.2496
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

B. COLBURN, RICHARD, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 SKOKIE BLVD STE 555
 City NORTHBROOK State IL Zip Code 60062-2854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAYROLL AND INSURANCE GROUP, INC. Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 09 / 12 / 2018
Transaction ID : SA11A.2485
 Amount of Each Receipt this Period 20000.00
 Memo Item CONTRIBUTION

C. HOLM, DIANE, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1211 COLLEGE POINT
 City WINTER PARK State FL Zip Code 32789-5729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RESTAURATEUR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 12 / 2018
Transaction ID : SA11A.2488
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	45000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. RANGOS, JOHN, G., MR., SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 OSPREY POINT CIR

City BOCA RATON	State FL	Zip Code 33431-5245
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
66000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2018

Transaction ID : SA11A.2484

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. CENTERONE FINANCIAL SERVICES LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 4421

City BRIDGETON	State MO	Zip Code 63044-0421
-------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2018

Transaction ID : SA11A.2489

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. CENTURY WARRANTY SERVICES, INC.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 3195

City JACKSONVILLE	State FL	Zip Code 32206-0195
----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2018

Transaction ID : SA11A.2494

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	45000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 23 OF 76
(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)
NEW REPUBLICAN PAC

A. COURTESY INSURANCE COMPANY
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 JIM MORAN BLVD
 City DEERFIELD BEACH State FL Zip Code 33442-1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2018
Transaction ID : SA11A.2491
 Amount of Each Receipt this Period
 10000.00
 Memo Item
CONTRIBUTION

B. FIDELITY WARRANTY SERVICES INC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 JIM MORAN BLVD
 City DEERFIELD BEACH State FL Zip Code 33442-1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2018
Transaction ID : SA11A.2492
 Amount of Each Receipt this Period
 10000.00
 Memo Item
CONTRIBUTION

C. SELECT MEDICAL CORPORATION
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4714 GETTYSBURG ROAD
 City MECHANICSBURG State PA Zip Code 17055-4325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2018
Transaction ID : SA11A.2493
 Amount of Each Receipt this Period
 100000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 120000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. SOUTHEAST TRANSPORTATION SYSTEMS, INC.

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

Mailing Address 100 JIM MORAN BLVD

City DEERFIELD BEACH	State FL	Zip Code 33442-1702
-------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2018

Transaction ID : SA11A.2490

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

B. BRINKER, NANCY, G., ,

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

Mailing Address 211 VIA TORTUGA

City PALM BEACH	State FL	Zip Code 33480-3638
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) 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
09		13		2018

Transaction ID : SA11A.2497

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. DIMICCO, DANIEL, R., ,

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

Mailing Address 1012 FIRETHORNE CLUB DR.

City WAXHAW	State NC	Zip Code 28173-6552
----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2018

Transaction ID : SA11A.2498

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	22500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. RUFFIN, PHIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3300 LAS VEGAS BLVD. S.
 City LAS VEGAS State NV Zip Code 89109-8916
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TREASURE ISLAND HOTEL AND CASINO Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 75000.00

Date of Receipt 09 / 13 / 2018
Transaction ID : SA11A.2503
 Amount of Each Receipt this Period 50000.00
 Memo Item
 CONTRIBUTION

B. CONSUMER POLICY LEAGUE INC.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2642 WARWICK CIRCLE NE
 City ATLANTA State GA Zip Code 30345-1634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350000.00

Date of Receipt 09 / 14 / 2018
Transaction ID : SA11A.2500
 Amount of Each Receipt this Period 350000.00
 Memo Item
 CONTRIBUTION

C. RAYES, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 195429
 City DALLAS State TX Zip Code 75219-8607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) OIL & GAS INVESTMENTS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 17 / 2018
Transaction ID : SA11A.2502
 Amount of Each Receipt this Period 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	405000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 76
<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)
NEW REPUBLICAN PAC

A. ROSEN, WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 277 GALEON COURT
 City CORAL GABLES State FL Zip Code 33143-6529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) LAND DEVELOPER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 17 / 2018
Transaction ID : SA11A.2501
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. HILL, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 N. 3RD AVE
 City HAILEY State ID Zip Code 83333-8459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JOLYNNE DEVELOPMENT, INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 18 / 2018
Transaction ID : SA11A.2504
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. ALLIANCE FOR CONSUMER PROTECTION INC.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3914 VILLAGE CENTER DRIVE
 City HOOVER State AL Zip Code 35226-6324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 375000.00

Date of Receipt 09 / 18 / 2018
Transaction ID : SA11A.2522
 Amount of Each Receipt this Period 375000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	425025.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

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

Mailing Address 11450 TURTLE BEACH ROAD

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2018

Transaction ID : SA11A.2520

Amount of Each Receipt this Period
50000.00

Memo Item CONTRIBUTION

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

Mailing Address 5138 W LONGFELLOW AVE

City TAMPA	State FL	Zip Code 33629-7534
---------------	-------------	------------------------

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

Name of Employer (for Individual) HCSO	Occupation (for Individual) MAJOR
---	--------------------------------------

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
09		19		2018

Transaction ID : SA11A.2507

Amount of Each Receipt this Period
25000.00

Memo Item CONTRIBUTION

C. EDWARDS, WILLIAM, L., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6090 CENTRAL AVE

City ST. PETERSBURG	State FL	Zip Code 33707-1622
------------------------	-------------	------------------------

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

Name of Employer (for Individual) MORTGAGE INVESTORS CORPORATION	Occupation (for Individual) CHAIRMAN & CEO
---	---

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
09		19		2018

Transaction ID : SA11A.2513

Amount of Each Receipt this Period
25000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. FRIESS, FOSTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 9790
 City JACKSON State WY Zip Code 83002-9790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 19 / 2018
Transaction ID : SA11A.2508
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. GRIFFIN, KEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 S DEARBORN ST
 City CHICAGO State IL Zip Code 60603-5517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CITADEL GROUP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 7500000.00

Date of Receipt 09 / 19 / 2018
Transaction ID : SA11A.2523
 Amount of Each Receipt this Period 2500000.00
 Memo Item CONTRIBUTION

C. MANSUR, E., BARRY, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16646 CAPTIVA DRIVE
 City CAPTIVA State FL Zip Code 33924-6022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MANSUR AND COMPANY Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2018
Transaction ID : SA11A.2509
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2511000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MAY, ROY, R., ,		Date of Receipt MM / DD / YYYY 09 / 19 / 2018
Mailing Address 180 BEACH DRIVE NE UNIT 1501		Transaction ID : SA11A.2516
City ST. PETERSBURG	State FL	Zip Code 33701-3910
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SEMBLER, BRENT, W., ,		Date of Receipt MM / DD / YYYY 09 / 19 / 2018
Mailing Address 5858 CENTRAL AVENUE		Transaction ID : SA11A.2515
City ST. PETERSBURG	State FL	Zip Code 33707-1720
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer (for Individual) THE SEMBLER COMPANY	Occupation (for Individual) REAL ESTATE DEVELOPER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SEMBLER, MELVIN, FLOYD, ,		Date of Receipt MM / DD / YYYY 09 / 19 / 2018
Mailing Address 5858 CENTRAL AVENUE		Transaction ID : SA11A.2517
City ST PETERSBURG	State FL	Zip Code 33707-1720
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer (for Individual) THE SEMBLER COMPANY	Occupation (for Individual) REAL ESTATE DEVELOPER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 25000.00	

SUBTOTAL of Receipts This Page (optional).....▶	60000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. STEERE, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27471 HARBOR COVE COURT
 City BONITA SPRINGS State FL Zip Code 34134-1620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 19 / 2018
Transaction ID : SA11A.2518
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

B. ZOLEY, GEORGE, C., DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 FAN PALM ROAD
 City BOCA RATON State FL Zip Code 33432-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE GEO GROUP, INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 19 / 2018
Transaction ID : SA11A.2512
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. ALLIANCE INSURANCE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4444 YORK STREET SUITE 100
 City METAIRIE State LA Zip Code 70001-7407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 19 / 2018
Transaction ID : SA11A.2524
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 77700.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. C. SHADER INVESTMENTS LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3101 NORTH FEDERAL HIGHWAY
 Ste #602
 City Fort Lauderdale State FL Zip Code 33306-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 19 / 2018
Transaction ID : SA11A.2519
 Amount of Each Receipt this Period 10000.00
 Memo Item
CONTRIBUTION

B. GEO ACQUISITION II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 621 NW 53RD ST
 SUITE 700
 City BOCA RATON State FL Zip Code 33487-8242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 19 / 2018
Transaction ID : SA11A.2511
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION

C. LAND EXPERTS, INC.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1651 WHITFIELD AVENUE
 SUITE 200
 City SARASOTA State FL Zip Code 34243-3950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 65000.00

Date of Receipt 09 / 19 / 2018
Transaction ID : SA11A.2514
 Amount of Each Receipt this Period 65000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MCNA HEALTH CARE HOLDINGS, LLC

Mailing Address 200 WEST CYPRESS CREEK ROAD
STE 500

City FORT LAUDERDALE State FL Zip Code 33309-2338

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
09 / 19 / 2018
Transaction ID : SA11A.2521

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. R&K EDWARDS INVESTMENTS LLC

Mailing Address 536 POINT LANE

City VERO BEACH State FL Zip Code 32963-2207

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt
09 / 19 / 2018
Transaction ID : SA11A.2510

Amount of Each Receipt this Period
2100.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SWISHER INTERNATIONAL INC

Mailing Address P.O. BOX 2230

City JACKSONVILLE State FL Zip Code 32203-2230

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
09 / 19 / 2018
Transaction ID : SA11A.2506

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	77100.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. THE CONSERVATIVE

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

Mailing Address 9485 NW 23RD PLACE

City GAINESVILLE	State FL	Zip Code 32606-9218
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2018

Transaction ID : SA11A.2526

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. BEZNOS, HAROLD, , ,

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

Mailing Address 31731 NORTHWESTERN HIGHWAY SUITE 2

City FARMINGTON HILLS	State MI	Zip Code 48334-1668
--------------------------	-------------	------------------------

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

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

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
09		25		2018

Transaction ID : SA11A.2535

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. BUSCH, AUGUST, , , III

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

Mailing Address 3561 SHORE LANE

City BOCA GRANDE	State FL	Zip Code 33921-
---------------------	-------------	--------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
265000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2018

Transaction ID : SA11A.2534

Amount of Each Receipt this Period
40000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	90000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 34 OF 76
(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)
NEW REPUBLICAN PAC

A. CALANDRA, FRANK, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 258 KAPPA DRIVE
 City PITTSBURGH State PA Zip Code 15238-2818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JENNMAR Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 25 / 2018
Transaction ID : SA11A.2536
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. HERTOEG, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1040 5TH AVE
 City NEW YORK State NY Zip Code 10028-0137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 25 / 2018
Transaction ID : SA11A.2530
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. JACOBSON, MICHAEL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 HIGHLAND AVE
 City CAMBRIDGE State MA Zip Code 02139-1016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) P.G.E. MANAGEMENT INC. Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 09 / 25 / 2018
Transaction ID : SA11A.2529
 Amount of Each Receipt this Period 35000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 60250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. MEZZALINGUA, DAN, , ,		Date of Receipt MM / DD / YYYY 09 / 25 / 2018
Mailing Address 8787 BAY COLONY DRIVE		Transaction ID : SA11A.2527
City NAPLES	State FL	Zip Code 34108-0779
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. NELSON, GREGORY, , ,		Date of Receipt MM / DD / YYYY 09 / 25 / 2018
Mailing Address 1900 OLD DIXIE HIGHWAY		Transaction ID : SA11A.2537
City FORT PIERCE	State FL	Zip Code 34946-1423
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4500.00
Name of Employer (for Individual) BERNARD EGAN & COMPANY	Occupation (for Individual) BUSINESS EXECUTIVE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. AMERICAN INVESTMENT HOLDINGS LLC		Date of Receipt MM / DD / YYYY 09 / 25 / 2018
Mailing Address 401 E JACKSON ST STE 2525		Transaction ID : SA11A.2531
City TAMPA	State FL	Zip Code 33602-5204
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 25000.00	

SUBTOTAL of Receipts This Page (optional).....▶	54500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. KOCH INDUSTRIES INC

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

Mailing Address 4111 EAST 37TH STREET NORTH

City WICHITA	State KS	Zip Code 67220-3203
-----------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2018

Transaction ID : SA11A.2532

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. SAZERAC COMPANY, INC.

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

Mailing Address 10400 LINN STATION ROAD
SUITE 300

City LOUISVILLE	State KY	Zip Code 40223-3897
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2018

Transaction ID : SA11A.2533

Amount of Each Receipt this Period
10000.00

Memo Item
CONTRIBUTION

C. COTO, JULIAN, , ,

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

Mailing Address 303 AVILA CT

City CASSELBERRY	State FL	Zip Code 32708-3917
---------------------	-------------	------------------------

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

Name of Employer (for Individual) EXCEL ENGINEERING	Occupation (for Individual) 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
 09 / 26 / 2018

Transaction ID : SA11A.2553

Amount of Each Receipt this Period
50.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	35050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 37 OF 76
	(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)
NEW REPUBLICAN PAC

A. PARADISE PARTNERS LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 4273
 City SARASOTA State FL Zip Code 34230-4273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 09 / 27 / 2018
Transaction ID : SA11A.2550
 Amount of Each Receipt this Period 15000.00
 Memo Item
CONTRIBUTION

B. BEAL, MEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5280 N OCEAN DR APT 16D
 City SINGER ISLAND State FL Zip Code 33404-2614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 AIRAMID HEALTH SERVICES HEALTH CARE ADMIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA11A.2547
 Amount of Each Receipt this Period 10000.00
 Memo Item
CONTRIBUTION

C. CAVANAUGH, STEVEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9036 SAND RIDGE DRIVE
 City HOLLAND State OH Zip Code 43528-9222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 HCR MANOR CARE VICE PRESIDENT & CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4300.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA11A.2539
 Amount of Each Receipt this Period 4300.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	29300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. COLLIER, PARKER, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9045 STRADA STELL COURT
 SUITE 500
 City NAPLES State FL Zip Code 34109-4438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA11A.2538
 Amount of Each Receipt this Period 100000.00
 Memo Item
 CONTRIBUTION

B. COX, BRAD, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4514 COLE AVE
 STE 1175
 City DALLAS State TX Zip Code 75205-4183
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COX OIL Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA11A.2542
 Amount of Each Receipt this Period 25000.00
 Memo Item
 CONTRIBUTION

C. FRALIN, HEYWOOD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 29600
 City ROANOKE State VA Zip Code 24018-0796
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEDICAL FACILITIES OF AMERICA Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA11A.2545
 Amount of Each Receipt this Period 10000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	135000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. GRUSS, MARTIN, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 S FLAGLER DR
 STE 801E
 City WEST PALM BEACH State FL Zip Code 33401-6134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GRUSS INVESTMENTS, L.L.C. Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA11A.2544
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. HOWE, DEBRA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12173 PLANTATION WAY
 City PALM BEACH GARDENS State FL Zip Code 33418-1570
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADVANCED HEALTH CARE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA11A.2546
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. KIRLEY, FRAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6937 WARFIELD AVENUE
 City SYKESVILLE State MD Zip Code 21784-7454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEXION HEALTH MANAGEMENT INC. Occupation (for Individual) PRESIDENT/CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4600.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA11A.2548
 Amount of Each Receipt this Period 4600.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	64600.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 76
<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)
NEW REPUBLICAN PAC

A. SAUL, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 635
 City KATONAH State NY Zip Code 10536-0635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PRIVATE INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA11A.2549
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. GREENPOINTE HOLDINGS
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7807 BAYMEADOWS EAST STE 205
 City JACKSONVILLE State FL Zip Code 32256-9666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA11A.2540
 Amount of Each Receipt this Period 25000.00
 Memo Item
CONTRIBUTION

C. RAYONIER, INC.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 RAYONIER WAY
 City WILDLIGHT State FL Zip Code 32097-0002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 09 / 28 / 2018
Transaction ID : SA11A.2541
 Amount of Each Receipt this Period 20000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	50000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. RED APPLE GROUP

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

Mailing Address 800 3RD AVENUE
5TH FLOOR

City NEW YORK State NY Zip Code 10022-7865

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
09 / 28 / 2018

Transaction ID : SA11A.2543

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. LORIA, JEFFREY, , ,

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

Mailing Address 19 EAST 72 STREET

City NEW YORK State NY Zip Code 10021-4145

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

Name of Employer (for Individual) Occupation (for Individual)
JEFFREY H LORIA & CO, INC. ART DEALER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
27000.00

Date of Receipt
09 / 30 / 2018

Transaction ID : SA11A.2561

Amount of Each Receipt this Period
27000.00

Memo Item
CONTRIBUTION

C. REYES, J., CHRISTOPHER, ,

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

Mailing Address 777 S FLAGLER DR
STE 1500

City WEST PALM BEACH State FL Zip Code 33401-6157

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

Name of Employer (for Individual) Occupation (for Individual)
REYES HOLDINGS, LLC EXECUTIVE

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
290000.00

Date of Receipt
09 / 30 / 2018

Transaction ID : SA11A.2566

Amount of Each Receipt this Period
250000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	302000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. REYES, M., JUDE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 S FLAGLER DR
 STE 1500
 City WEST PALM BEACH State FL Zip Code 33401-6157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REYES HOLDINGS, LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290000.00

Date of Receipt 09 / 30 / 2018
Transaction ID : SA11A.2565
 Amount of Each Receipt this Period 250000.00
 Memo Item CONTRIBUTION

B. SPENCER, ROBERT, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4820 RIVERVIEW BLVD
 City BRADENTON State FL Zip Code 34209-1936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST COAST TOMATO Occupation (for Individual) AGRICULTURE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2018
Transaction ID : SA11A.2562
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. TOVAR, ROGELIO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 143975
 City CORAL GABLES State FL Zip Code 33114-3975
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RT HOLDINGS, LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 09 / 30 / 2018
Transaction ID : SA11A.2559
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	257700.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 43 OF 76
(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)
NEW REPUBLICAN PAC

A. AUBURN MANOR HOLDING CORPORATION
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4020 SIERRA COLLEGE BLVD.
 SUITE 200
 City ROCKLIN State CA Zip Code 95677-3906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2018
Transaction ID : SA11A.2567
 Amount of Each Receipt this Period
 10000.00
 Memo Item
CONTRIBUTION

B. DOSAL TOBACCO CORPORATION
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4775 NW 132ND ST
 City OPA LOCKA State FL Zip Code 33054-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2018
Transaction ID : SA11A.2568
 Amount of Each Receipt this Period
 10000.00
 Memo Item
CONTRIBUTION

C. GEMINI FINANCIAL
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 NORTHCORP PKWY
 SUITE 400
 City PALM BEACH GARDENS State FL Zip Code 33410-4314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2018
Transaction ID : SA11A.2560
 Amount of Each Receipt this Period
 10000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 30000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (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 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<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)
NEW REPUBLICAN PAC

A. H.J. KALIKOW & CO LLC

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

Mailing Address 101 PARK AVENUE
25TH FLOOR

City NEW YORK State NY Zip Code 10178-0002

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2018
Transaction ID : SA11A.2564

Amount of Each Receipt this Period 5000.00

Memo Item CONTRIBUTION

B. SARASOTA JET SERVICES LLC

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

Mailing Address 8191 N. TAMIAMI TRAIL

City SARASOTA State FL Zip Code 34243-2052

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 09 / 30 / 2018
Transaction ID : SA11A.2563

Amount of Each Receipt this Period 25000.00

Memo Item CONTRIBUTION

C.

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

Mailing Address

City State Zip Code

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 30000.00

TOTAL This Period (last page this line number only)..... ▶ 6679800.00

**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 45 OF 76
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. RIGHT TO RISE USA		Date of Receipt MM / DD / YYYY 09 / 12 / 2018 Transaction ID : SA11C.2483
Mailing Address 1001 PENNSYLVANIA AVE NW		Amount of Each Receipt this Period 50000.00
City WASHINGTON	State DC	Zip Code 20004-2505
FEC ID number of contributing federal political committee. C C00571372		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CHS/COMMUNITY HEALTH SYSTEMS, INC. POLITICAL ACTIO		Date of Receipt MM / DD / YYYY 09 / 25 / 2018 Transaction ID : SA11C.2528
Mailing Address 4000 MERIDIAN BLVD		Amount of Each Receipt this Period 2500.00
City FRANKLIN	State TN	Zip Code 37067-6325
FEC ID number of contributing federal political committee. C C00485896		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

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

SUBTOTAL of Receipts This Page (optional).....▶	52500.00
TOTAL This Period (last page this line number only).....▶	52500.00

**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 46 OF 76
<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

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)
NEW REPUBLICAN PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CONSERVATIVES FOR BETTER LEADERSHIP

Mailing Address 1017 JOWERS LN

City BIRMINGHAM	State AL	Zip Code 35213-2015
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2018

Transaction ID : SA11A.2499

Amount of Each Receipt this Period
150000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CONSERVATIVES FOR BETTER LEADERSHIP

Mailing Address 1017 JOWERS LN

City BIRMINGHAM	State AL	Zip Code 35213-2015
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2018

Transaction ID : SA11A.2525

Amount of Each Receipt this Period
125000.00

Memo Item
CONTRIBUTION

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	275000.00
TOTAL This Period (last page this line number only).....	275000.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address PO BOX 84314

City
BATON ROUGE

State
LA

Zip Code
70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 1252

Amount of Each Disbursement this Period

[] 19.80 []

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address PO BOX 84314

City
BATON ROUGE

State
LA

Zip Code
70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	1	8

FEC Identification Number

C []

Transaction ID : 1253

Amount of Each Disbursement this Period

[] 975.30 []

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD
STE 400

City
TYSONS CORNER

State
VA

Zip Code
22182

Purpose of Disbursement
DATABASE MANAGEMENT

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	8		1	6		2	0	1	8

FEC Identification Number

C []

Transaction ID : 1280

Amount of Each Disbursement this Period

[] 1500.00 []

Memo Item

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

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

[] 2495.10 []

[] [] [] [] [] [] [] [] [] []

**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"/> 26	<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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address PO BOX 84314

City
BATON ROUGE

State
LA

Zip Code
70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 1254

Amount of Each Disbursement this Period

[] 1.78

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICA RISING LLC

Mailing Address 1500 WILSON BLVD
5TH FLOOR

City
ARLINGTON

State
VA

Zip Code
22209

Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C []

Transaction ID : 1250

Amount of Each Disbursement this Period

[] 7000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DT CLIENT SERVICES, LLC

Mailing Address 1101 14TH STREET NW
SUITE 650

City
WASHINGTON

State
DC

Zip Code
20005

Purpose of Disbursement
LIST RENTAL

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	8		2	2		2	0	1	8

FEC Identification Number

C []

Transaction ID : 1285

Amount of Each Disbursement this Period

[] 375.00

Memo Item

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

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

[] 7376.78

[]

**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"/> 26	<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)
NEW REPUBLICAN PAC

A. HOLTZMAN VOGEL

Full Name (Last, First, Middle Initial)

Mailing Address 45 NORTH HILL DRIVE
STE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 22 / 2018

FEC Identification Number: C

Transaction ID : 1288

Amount of Each Disbursement this Period: 7500.00

Memo Item

B. SRCP MEDIA

Full Name (Last, First, Middle Initial)

Mailing Address 201 N. UNION ST.
SUITE 200

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement PRODUCTION COST

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 22 / 2018

FEC Identification Number: C

Transaction ID : 1293

Amount of Each Disbursement this Period: 35379.00

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 84314

City BATON ROUGE State LA Zip Code 70884

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 23 / 2018

FEC Identification Number: C

Transaction ID : 1255

Amount of Each Disbursement this Period: 1139.70

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 44018.70

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address PO BOX 84314

City
BATON ROUGE

State
LA

Zip Code
70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	8

FEC Identification Number

C									
---	--	--	--	--	--	--	--	--	--

Transaction ID : 1256

Amount of Each Disbursement this Period

									183.90

Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City
MCLEAN

State
VA

Zip Code
22101

Purpose of Disbursement
BANK CHARGES

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	8		2	4		2	0	1	8

FEC Identification Number

C									
---	--	--	--	--	--	--	--	--	--

Transaction ID : 1272

Amount of Each Disbursement this Period

									40.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SRCP MEDIA

Mailing Address 201 N. UNION ST.
SUITE 200

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
PRODUCTION COST

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	8		2	4		2	0	1	8

FEC Identification Number

C									
---	--	--	--	--	--	--	--	--	--

Transaction ID : 1294

Amount of Each Disbursement this Period

									59544.00

Memo Item

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

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

									59767.90

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

**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"/> 26	<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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address PO BOX 84314

City
BATON ROUGE

State
LA

Zip Code
70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : 1257

Amount of Each Disbursement this Period

[REDACTED] 2.25

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address PO BOX 84314

City
BATON ROUGE

State
LA

Zip Code
70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : 1258

Amount of Each Disbursement this Period

[REDACTED] 975.60

Memo Item

Full Name (Last, First, Middle Initial)

C. MCLAUGHLIN & ASSOCIATES, INC.

Mailing Address 566 S. ROUTE 303

City
BLAUVELT

State
NY

Zip Code
10913

Purpose of Disbursement
SURVEY RESEARCH

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	8		2	7		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : 1292

Amount of Each Disbursement this Period

[REDACTED] 47700.00

Memo Item

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

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

[REDACTED] 48677.85

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
NEW REPUBLICAN PAC

A. TAG REAL ESTATE HOLDINGS, LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 204 S MONROE ST
STE A

M M M	/	D D D	/	Y Y Y Y Y
08		27		2018

City TALLAHASSEE State FL Zip Code 32301

FEC Identification Number

Purpose of Disbursement RENT

C

Transaction ID : 1296
Amount of Each Disbursement this Period

Candidate Name

Category/Type

1852.93

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

B. CHAIN BRIDGE BANK

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1445-A LAUGHLIN AVE

M M M	/	D D D	/	Y Y Y Y Y
08		28		2018

City MCLEAN State VA Zip Code 22101

FEC Identification Number

Purpose of Disbursement BANK CHARGES

C

Transaction ID : 1273
Amount of Each Disbursement this Period

Candidate Name

Category/Type

20.00

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

C. THE ARCHMANN GROUP

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 6618 HEARTLAND CIRCLE

M M M	/	D D D	/	Y Y Y Y Y
08		28		2018

City TALLAHASSEE State FL Zip Code 32312

FEC Identification Number

Purpose of Disbursement FUNDRAISING CONSULTING

C

Transaction ID : 1298
Amount of Each Disbursement this Period

Candidate Name

Category/Type

9590.00

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

11462.93

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

--

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK		Date of Disbursement MM / DD / YYYY 08 / 29 / 2018
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : 1274 Amount of Each Disbursement this Period [] 20.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK CHARGES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement MM / DD / YYYY 08 / 30 / 2018
Mailing Address PO BOX 84314		FEC Identification Number C [] Transaction ID : 1259 Amount of Each Disbursement this Period [] 780.30
City BATON ROUGE	State LA	Zip Code 70884
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK		Date of Disbursement MM / DD / YYYY 08 / 30 / 2018
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : 1275 Amount of Each Disbursement this Period [] 20.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK CHARGES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

[] 820.30

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

[]

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
NEW REPUBLICAN PAC

A. WALKER, AVERY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1228 INDEPENDENCE AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement FUNDRAISING CONSULTING / PHONE EXPENSE / BANK CHARGES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2018

FEC Identification Number: C

Transaction ID : 1300

Amount of Each Disbursement this Period: 3952.00

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 84314

City BATON ROUGE State LA Zip Code 70884

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2018

FEC Identification Number: C

Transaction ID : 1260

Amount of Each Disbursement this Period: 2340.90

Memo Item

C. CHAIN BRIDGE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement BANK CHARGES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 31 / 2018

FEC Identification Number: C

Transaction ID : 1276

Amount of Each Disbursement this Period: 20.00

Memo Item

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

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

6312.90

**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"/> 26	<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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address PO BOX 84314

City
BATON ROUGE

State
LA

Zip Code
70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : 1261

Amount of Each Disbursement this Period

[REDACTED] 1.28

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address PO BOX 84314

City
BATON ROUGE

State
LA

Zip Code
70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : 1262

Amount of Each Disbursement this Period

[REDACTED] 390.30

Memo Item

Full Name (Last, First, Middle Initial)

C. CAVALRY STRATEGIES, LLC

Mailing Address 204 S. MONROE ST.
SUITE 201

City
TALLAHASSEE

State
FL

Zip Code
32301

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING / TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : 1271

Amount of Each Disbursement this Period

[REDACTED] 10373.78

Memo Item

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

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

[REDACTED] 10765.36

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. DT CLIENT SERVICES, LLC		Date of Disbursement MM / DD / YYYY 09 / 04 / 2018
Mailing Address 1101 14TH STREET NW SUITE 650		FEC Identification Number C [] Transaction ID : 1286 Amount of Each Disbursement this Period [] 375.00
City WASHINGTON	State DC	Zip Code 20005
Purpose of Disbursement LIST RENTAL		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. GRASSROOTS TARGETING		Date of Disbursement MM / DD / YYYY 09 / 04 / 2018
Mailing Address 707 PRINCE ST		FEC Identification Number C [] Transaction ID : 1287 Amount of Each Disbursement this Period [] 28156.92
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement POLITICAL STRATEGY CONSULTING / TRAVEL / OFFICE SUPPLIES / FOOD/BEVERAGE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. SRCP MEDIA		Date of Disbursement MM / DD / YYYY 09 / 04 / 2018
Mailing Address 201 N. UNION ST. SUITE 200		FEC Identification Number C [] Transaction ID : 1295 Amount of Each Disbursement this Period [] 5000.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 33531.92
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. DRUCKER LAWHON		Date of Disbursement MM / DD / YYYY 09 / 05 / 2018	
Mailing Address 2647 JACKSON DRIVE		FEC Identification Number C [REDACTED] Transaction ID : 1284 Amount of Each Disbursement this Period [REDACTED] 124666.67	
City FALLS CHURCH	State VA	Zip Code 22043	Category/ Type [REDACTED]
Purpose of Disbursement FUNDRAISING CONSULTING / TRAVEL / FOOD/BEVERAGE			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement MM / DD / YYYY 09 / 06 / 2018	
Mailing Address PO BOX 84314		FEC Identification Number C [REDACTED] Transaction ID : 1263 Amount of Each Disbursement this Period [REDACTED] 975.30	
City BATON ROUGE	State LA	Zip Code 70884	Category/ Type [REDACTED]
Purpose of Disbursement CREDIT CARD PROCESSING FEE			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement MM / DD / YYYY 09 / 07 / 2018	
Mailing Address PO BOX 84314		FEC Identification Number C [REDACTED] Transaction ID : 1264 Amount of Each Disbursement this Period [REDACTED] 1950.30	
City BATON ROUGE	State LA	Zip Code 70884	Category/ Type [REDACTED]
Purpose of Disbursement CREDIT CARD PROCESSING FEE			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

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

[REDACTED] 127592.27
[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. CHAIN BRIDGE BANK		Date of Disbursement MM / DD / YYYY 09 / 07 / 2018
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : 1277 Amount of Each Disbursement this Period [] 12.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK CHARGES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK		Date of Disbursement MM / DD / YYYY 09 / 11 / 2018
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [] Transaction ID : 1278 Amount of Each Disbursement this Period [] 20.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK CHARGES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AMERICA RISING LLC		Date of Disbursement MM / DD / YYYY 09 / 12 / 2018
Mailing Address 1500 WILSON BLVD 5TH FLOOR		FEC Identification Number C [] Transaction ID : 1251 Amount of Each Disbursement this Period [] 7000.00
City ARLINGTON	State VA	Zip Code 22209
Purpose of Disbursement RESEARCH CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

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

[] 7032.00
[]

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial)
A. ANEDOT

Date of Disbursement: MM / DD / YYYY
09 / 12 / 2018

Mailing Address PO BOX 84314

City: BATON ROUGE State: LA Zip Code: 70884

Purpose of Disbursement: CREDIT CARD PROCESSING FEE

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: C _____
Transaction ID : 1265
Amount of Each Disbursement this Period: _____ 585.30

Memo Item

Full Name (Last, First, Middle Initial)
B. CROSBY OTTENHOFF GROUP

Date of Disbursement: MM / DD / YYYY
09 / 12 / 2018

Mailing Address 611 PENNSYLVANIA AVE SE #267

City: WASHINGTON State: DC Zip Code: 20003

Purpose of Disbursement: COMPLIANCE CONSULTING / POSTAGE

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: C _____
Transaction ID : 1282
Amount of Each Disbursement this Period: _____ 5290.27

Memo Item

Full Name (Last, First, Middle Initial)
C. IWS PUBLIC AFFAIRS LLC

Date of Disbursement: MM / DD / YYYY
09 / 12 / 2018

Mailing Address 5330 N 12TH STREET

City: PHOENIX State: AZ Zip Code: 85014

Purpose of Disbursement: POLITICAL STRATEGY CONSULTING

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: C _____
Transaction ID : 1290
Amount of Each Disbursement this Period: _____ 62.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ _____ 5938.07

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address PO BOX 84314

City
BATON ROUGE

State
LA

Zip Code
70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 1266

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address PO BOX 84314

City
BATON ROUGE

State
LA

Zip Code
70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 1267

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address PO BOX 84314

City
BATON ROUGE

State
LA

Zip Code
70884

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 1268

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. HOLTZMAN VOGEL		Date of Disbursement MM / DD / YYYY 09 / 20 / 2018
Mailing Address 45 NORTH HILL DRIVE STE 100		FEC Identification Number C [REDACTED] Transaction ID : 1289 Amount of Each Disbursement this Period [REDACTED] 3200.00
City WARRENTON	State VA	Zip Code 20186
Purpose of Disbursement LEGAL CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. TAG REAL ESTATE HOLDINGS, LLC		Date of Disbursement MM / DD / YYYY 09 / 22 / 2018
Mailing Address 204 S MONROE ST STE A		FEC Identification Number C [REDACTED] Transaction ID : 1297 Amount of Each Disbursement this Period [REDACTED] 1852.93
City TALLAHASSEE	State FL	Zip Code 32301
Purpose of Disbursement RENT		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement MM / DD / YYYY 09 / 26 / 2018
Mailing Address PO BOX 84314		FEC Identification Number C [REDACTED] Transaction ID : 1269 Amount of Each Disbursement this Period [REDACTED] 2.25
City BATON ROUGE	State LA	Zip Code 70884
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

5055.18

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
NEW REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. WALKER, AVERY, , ,		Date of Disbursement MM / DD / YYYY 09 / 27 / 2018
Mailing Address 1228 INDEPENDENCE AVE SE		FEC Identification Number C [REDACTED] Transaction ID : 1301 Amount of Each Disbursement this Period 3970.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FUNDRAISING CONSULTING / PHONE EXPENSE / BANK CHARGES / TRAVEL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CHAIN BRIDGE BANK		Date of Disbursement MM / DD / YYYY 09 / 27 / 2018
Mailing Address 1445-A LAUGHLIN AVE		FEC Identification Number C [REDACTED] Transaction ID : 1279 Amount of Each Disbursement this Period 60.00
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement BANK CHARGES		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. MATSON MEDIA		Date of Disbursement MM / DD / YYYY 09 / 27 / 2018
Mailing Address 1201 HAMPTON STREET SUITE 3B		FEC Identification Number C [REDACTED] Transaction ID : 1291 Amount of Each Disbursement this Period 2685490.52
City COLUMBIA	State SC	Zip Code 29201
Purpose of Disbursement DEPOSIT - MEDIA PLACEMENT		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

2689520.52

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)
NEW REPUBLICAN PAC

A. RING POWER CORPORATION

Full Name (Last, First, Middle Initial)

Mailing Address 500 WORLD COMMERCE PARKWAY

City St Augustine State FL Zip Code 32092

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB28A.1

Amount of Each Disbursement this Period: 50000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	50000.00
TOTAL This Period (last page this line number only).....▶	50000.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4494**
NEW REPUBLICAN PAC

LOAN SOURCE Full Name (Last, First, Middle Initial) Castellanos, Alejandro, , ,			<input checked="" type="checkbox"/> N <input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 399 North Quaker Lane				
City Alexandria	State VA	ZIP Code 22304		

Original Amount of Loan 20000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 20000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred MM / DD / YYYY 02 / 03 / 2015	Date Due MM / DD / YYYY 12 / 31 / 2015	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	--	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	▶	20000.00
TOTALS This Period (last page in this line only)	▶	20000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 67 OF 76
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): PRINTING BOOKLETS
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 18012.93	Transaction ID : SD10.4612	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 18012.93

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 3769.58	Transaction ID : SD10.4614	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3769.58

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 2248.68	Transaction ID : SD10.4621	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2248.68

1) SUBTOTALS This Period This Page (optional)..... ▶	24031.19
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 68 OF 76
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): BOOKLET PRINTING
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="2117.29"/>	Transaction ID : SD10.4622	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2117.29"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): PRINTING - ADVERTISING/MARKETING BOOKLET
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="904.12"/>	Transaction ID : SD10.4641	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="904.12"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="2640.03"/>	Transaction ID : SD10.4642	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2640.03"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="5661.44"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 69 OF 76
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): MARKETING BOOKS
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="1352.72"/>	Transaction ID : SD10.4651	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1352.72"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="2377.72"/>	Transaction ID : SD10.4650	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2377.72"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING - JANUARY
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="20833.34"/>	Transaction ID : SD10.4679	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="20833.34"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="24563.78"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 70 OF 76
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING FEBRUARY
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 20833.34	Transaction ID : SD10.4682	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20833.34

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 1667.73	Transaction ID : SD10.4683	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1667.73

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING MARCH 2016
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 20833.34	Transaction ID : SD10.4693	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20833.34

1) SUBTOTALS This Period This Page (optional)..... ▶	43334.41
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 71 OF 76
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 610.66	Transaction ID : SD10.4694	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 610.66

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING APRIL 2016
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 20833.34	Transaction ID : SD10.4695	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20833.34

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 602.16	Transaction ID : SD10.4696	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 602.16

1) SUBTOTALS This Period This Page (optional)..... ▶	22046.16
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 72 OF 76
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): ADMINISTRATIVE CONSULTING - MAY 2016
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 20833.34	Transaction ID : SD10.4717	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20833.34

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 341.96	Transaction ID : SD10.4718	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 341.96

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): SHIPPING EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 123.76	Transaction ID : SD10.4728	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 123.76

1) SUBTOTALS This Period This Page (optional)..... ▶	21299.06
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 73 OF 76
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="2198.24"/>	Transaction ID : SD10.4729	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2198.24"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): STRATEGIC CONSULTING
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="20833.34"/>	Transaction ID : SD10.4730	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="20833.34"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): SHIPPING AND NEW REPUBLICAN MERCHANDISE
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="4420.95"/>	Transaction ID : SD10.4752	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4420.95"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="27452.53"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 74 OF 76
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): SHIPPING/MARKETING
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="775.15"/>	Transaction ID : SD10.4750	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="775.15"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): SHIPPING EXPENSE
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="155.00"/>	Transaction ID : SD10.4761	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="155.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NEW REPUBLICAN, LLC			Nature of Debt (Purpose): PRINTING
Mailing Address 815 SLATERS LANE			
City ALEXANDRIA	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="2433.70"/>	Transaction ID : SD10.4809	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2433.70"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="3363.85"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="171752.42"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="20000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="191752.42"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
NEW REPUBLICAN PAC
FEC IDENTIFICATION NUMBER
C C00544544

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

Full Name of Payee MATSON MEDIA LLC
Mailing Address 1201 HAMPTON STREET SUITE 3B
City COLUMBIA State SC Zip Code 29201
Purpose of Expenditure MEDIA PLACEMENT
Name of Federal Candidate: NELSON, BILL, , ,
Calendar Year-To-Date Per Election for Office Sought 8370281.11
Disbursement For: General 2018

Full Name of Payee SRCP MEDIA
Mailing Address 201 N. UNION ST. SUITE 200
City ALEXANDRIA State VA Zip Code 22314
Purpose of Expenditure MEDIA PRODUCTION
Name of Federal Candidate: NELSON, BILL, , ,
Calendar Year-To-Date Per Election for Office Sought 8370281.11
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 3047741.01
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

DOZIER, JULIE, , ,

[Electronically Filed]

Date 08 / 31 / 2018

Signature

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

NAME OF COMMITTEE (In Full) NEW REPUBLICAN PAC	FEC IDENTIFICATION NUMBER ▼ C C00544544
--	--

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

Full Name of Payee <input type="checkbox"/> Memo Item MATSON MEDIA LLC			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 1201 HAMPTON STREET SUITE 3B			Amount <input type="text"/>		
City COLUMBIA	State SC	Zip Code 29201	Transaction ID : 1352		
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: NELSON, BILL, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 8410481.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item MATSON MEDIA LLC			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 1201 HAMPTON STREET SUITE 3B			Amount <input type="text"/>		
City COLUMBIA	State SC	Zip Code 29201	Transaction ID : 1353		
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: NELSON, BILL, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 9409769.86			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 1039488.75
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/> 4087229.76

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

DOZIER, JULIE, , ,

[Electronically Filed]

Date / /

Signature